## Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 1 of 62

| Fill in this information to identify your case: |                                 |                                    |
|---|---------------------------------|------------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                    |
| NORTHERN DISTRICT OF GEORGIA                    | -                               |                                    |
| Case number (if known)                          | _ Chapter you are filing under: |                                    |
|   | ■ Chapter 7                     |                                    |
|   | ☐ Chapter 11                    |                                    |
|   | ☐ Chapter 12                    |                                    |
|   | ☐ Chapter 13                    | Check if this is an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself   |  |  |
|-----|--|--|--|
|     |  | About Debtor 1:                                | About Debtor 2 (Spouse Only in a Joint Case):  |
| 1.  | Your full name   |  |  |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).        | Kariim First name  Edward Middle name          | Laquisha First name  Rena Middle name          |
|     | Bring your picture identification to your meeting with the trustee.  | Smith Last name and Suffix (Sr., Jr., II, III) | Smith Last name and Suffix (Sr., Jr., II, III) |
| 2.  | All other names you have used in the last 8 years Include your married or maiden names.  | Kariim E. Smith<br>Kariim Smith                | Laquisha R. Smith<br>Laquisha Smith            |
| 3.  | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-8678                                    | xxx-xx-3668                                    |

Debtor 1 Kariim Edward Smith Debtor 2 Laquisha Rena Smith

Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ■ I have not used any business name or EINs.  Business name(s)  EINs   |
|    |  |   |  |
| 5. | Where you live   | 2544 Sibley Drive, NE   | If Debtor 2 lives at a different address:  |
|    |  | Atlanta, GA 30324  Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code   |
|    |  | Fulton County   | County   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for   | Check one:  | Check one:   |
|    | bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I<br>have lived in this district longer than in any other<br>district.                 |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |  |   |  |

| Deb | otor 2 Laquisha Rena Sn   | nith     |            |   |             | Case r              | number (if known)         |                                   |
|-----|---|----------|------------|---|-------------|---------------------|---------------------------|-----------------------------------|
|     |   |          |            |   |             |                     |                           |                                   |
| Par | t 2: Tell the Court About   | our Banl | kruptcy Ca | ise   |             |                     |                           |                                   |
| 7.  | The chapter of the<br>Bankruptcy Code you are                             |          |            | orief description of each, see go to the top of page 1 and                                      |             |                     | .C. § 342(b) for Individu | uals Filing for Bankruptcy        |
|     | choosing to file under  | ■ Chap   | oter 7     |   |             |                     |                           |                                   |
|     |   | ☐ Chap   | oter 11    |   |             |                     |                           |                                   |
|     |   | ☐ Chap   |            |   |             |                     |                           |                                   |
|     |   | ☐ Chap   |            |   |             |                     |                           |                                   |
|     |   |          |            |   |             |                     |                           |                                   |
| 8.  | How you will pay the fee  | ab<br>or | out how yo | entire fee when I file my pour may pay. Typically, if you attorney is submitting your paddress. | are paying  | the fee yourself,   | you may pay with cash     | n, cashier's check, or money      |
|     |   |          |            | the fee in installments. If you in Installments (Official Fo                                    |             | e this option, sign | and attach the Applica    | ation for Individuals to Pay      |
|     |   | ☐ Ir     | equest tha | it my fee be waived (You ma   | ay request  |                     |                           |                                   |
|     |   |          |            | uired to, waive your fee, and<br>ur family size and you are un                                  |             |                     |                           | of the official poverty line that |
|     |   |          |            | on to Have the Chapter 7 Fili   |             |                     |                           |                                   |
|     |   |          |            |   |             |                     |                           |                                   |
| 9.  | Have you filed for bankruptcy within the                                  | □ No.    |            |   |             |                     |                           |                                   |
|     | last 8 years?   | Yes.     |            |   |             |                     |                           |                                   |
|     |   |          |            | Northern District of  |             |                     |                           |                                   |
|     |   |          | District   | Georgia   | When        | 2/23/11             | Case number               | 11-55311                          |
|     |   |          | District   |   | When        |                     | Case number               |                                   |
|     |   |          | District   |   | When        |                     | Case number               |                                   |
| 10. | Are any bankruptcy  | ■ No     |            |   |             |                     |                           |                                   |
|     | cases pending or being filed by a spouse who is not filing this case with | ☐ Yes.   |            |   |             |                     |                           |                                   |
|     | you, or by a business partner, or by an affiliate?                        |          |            |   |             |                     |                           |                                   |
|     |   |          | Debtor     |   |             |                     | Relationship to y         | /ou                               |
|     |   |          | District   |   | When        |                     | Case number, if           | known                             |
|     |   |          | Debtor     |   |             |                     | Relationship to y         | /ou                               |
|     |   |          | District   |   | When        |                     | Case number, if           | known                             |
| 11. | Do you rent your  | □ No.    | Go to li   | ine 12.   |             |                     |                           |                                   |
|     | residence?  | Yes.     | Has yo     | our landlord obtained an evic   | tion judgm  | ent against you?    |                           |                                   |
|     |   | - res.   | •          | No. Go to line 12.  | , 5         | 3 1,111             |                           |                                   |
|     |   |          |            |   |             | a Fridadia a di d   |                           | 4044)                             |
|     |   |          |            | Yes. Fill out <i>Initial Statemer</i> bankruptcy petition.                                      | nt About ai | n ⊑viction Judgme   | ent Against You (Form     | TUTA) and file it with this       |
|     |   |          |            |   |             |                     |                           |                                   |

Debtor 1 Kariim Edward Smith

|     | otor 1 Kariim Edward Sn<br>otor 2 Laquisha Rena Sn   |                        |   | Case number (if known)   |
|-----|--|------------------------|---|--|
|     |  |                        |   |  |
| Par | Report About Any Bu  | sinesses               | You Own as a Sole Proprie                           | etor   |
| 12. | Are you a sole proprietor of any full- or part-time business?  | ■ No.                  | Go to Part 4.                                       |  |
|     |  | ☐ Yes.                 | Name and location of bu                             | siness   |
|     | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. |                        | Name of business, if any                            | /  |
|     | If you have more than one sole proprietorship, use a separate sheet and attach   |                        | Number, Street, City, Sta                           | ate & ZIP Code   |
|     | it to this petition.   |                        | • • •   | ox to describe your business:  |
|     |  |                        | ☐ Health Care Bus                                   | iness (as defined in 11 U.S.C. § 101(27A))   |
|     |  |                        | ☐ Single Asset Rea                                  | al Estate (as defined in 11 U.S.C. § 101(51B))   |
|     |  |                        | ☐ Stockbroker (as                                   | defined in 11 U.S.C. § 101(53A))   |
|     |  |                        | ☐ Commodity Brok                                    | er (as defined in 11 U.S.C. § 101(6))  |
|     |  |                        | ☐ None of the above                                 | ve   |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?  | deadlines<br>operation | s. If you indicate that you are                     | e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure |
|     | For a definition of small  | ■ No.                  | I am not filing under Cha                           | apter 11.  |
|     | business debtor, see 11 U.S.C. § 101(51D).   | □ No.                  | I am filing under Chapter<br>Code.                  | r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy   |
|     |  | ☐ Yes.                 | I am filing under Chapter                           | r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  |
| Par | t 4: Report if You Own or  | Have Any               | Hazardous Property or A                             | ny Property That Needs Immediate Attention   |
| 14. |  | ■ No.                  |   |  |
|     | property that poses or is alleged to pose a threat   | ☐ Yes.                 |   |  |
|     | of imminent and  | <b>—</b> 103.          | What is the hazard?                                 |  |
|     | identifiable hazard to public health or safety?  |                        |   |  |
|     | Or do you own any  |                        | If immediate attention is                           |  |
|     | property that needs immediate attention?   |                        | If immediate attention is needed, why is it needed? |  |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?                                |                        | Where is the property?                              |  |
|     |  |                        |   | Number, Street, City, State & Zip Code   |
|     |  |                        |   |  |

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 5 of 62

|          |                     | Document | 1 age 3 01 02          |
|----------|---------------------|----------|------------------------|
| Debtor 1 | Kariim Edward Smith |          |                        |
| Debtor 2 | Laquisha Rena Smith |          | Case number (if known) |

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb<br>Deb | tor 1 Kariim Edward Sn<br>tor 2 Laquisha Rena Sn               |                       |   |                                      | Case nu                     | umber (if known)   |             |
|------------|--|-----------------------|---|--------------------------------------|-----------------------------|--|-------------|
| Part       | 6: Answer These Questi   | ions for Re           | eporting Purposes   |                                      |                             |  |             |
| 16.        | What kind of debts do you have?                                | 16a.                  | Are your debts primarily consur individual primarily for a personal,        | ner debts? Cons<br>family, or househ | sumer debts are             | e defined in 11 U.S.C. § 101(8) as "incurred b   | y an        |
|            |  |                       | ■ No. Go to line 16b.   |                                      |                             |  |             |
|            |  |                       | ☐ Yes. Go to line 17.   |                                      |                             |  |             |
|            |  | 16b.                  | Are your debts primarily busines money for a business or investment         |                                      |                             |  |             |
|            |  |                       | ☐ No. Go to line 16c.   |                                      |                             |  |             |
|            |  |                       | Yes. Go to line 17.   |                                      |                             |  |             |
|            |  | 16c.                  | State the type of debts you owe th  | at are not consun                    | ner debts or bu             | usiness debts  |             |
| 17.        | Are you filing under<br>Chapter 7?                             | □ No.                 | I am not filing under Chapter 7. Go   | to line 18.                          |                             |  |             |
|            | Do you estimate that after any exempt property is excluded and | ■ Yes.                | I am filing under Chapter 7. Do you are paid that funds will be available   |                                      |                             | t property is excluded and administrative expeditors?  | enses       |
|            | administrative expenses are paid that funds will               |                       | ■ No  |                                      |                             |  |             |
|            | be available for distribution to unsecured creditors?          |                       | Yes   |                                      |                             |  |             |
| 18.        | How many Creditors do  | <b>1</b> -49          |   | <b>1</b> ,000-5,000                  |                             | <b>1</b> 25,001-50,000   |             |
|            | you estimate that you owe?                                     | □ 50-99               |   | ☐ 5001-10,000                        |                             | ☐ 50,001-100,000   |             |
|            |  | ☐ 100-19<br>☐ 200-99  |   | 10,001-25,00                         | JU                          | ☐ More than100,000   |             |
| 19.        | How much do you  | <b>□</b> \$0 - \$9    | 50,000  | □ \$1,000,001 -                      | \$10 million                | ☐ \$500,000,001 - \$1 billion  |             |
|            | estimate your assets to be worth?                              |                       | 01 - \$100,000  | \$10,000,001                         |                             | □ \$1,000,000,001 - \$10 billion   |             |
|            |  |                       | 001 - \$500,000<br>001 - \$1 million  | □ \$50,000,001<br>□ \$100,000,00     |                             |  |             |
| 20.        | How much do you  | <b>□</b> \$0 - \$9    | 50,000  | □ \$1,000,001 -                      | \$10 million                | □ \$500,000,001 - \$1 billion  |             |
|            | estimate your liabilities to be?                               | _                     | 01 - \$100,000  | \$10,000,001                         |                             | \$1,000,000,001 - \$10 billion   |             |
|            |  |                       | 001 - \$500,000<br>001 - \$1 million  | □ \$50,000,001<br>□ \$100,000,00     | •                           | _ · · · · ·  |             |
|            |  | <b>—</b> \$500,0      | υστ - ψτ πιιιισπ  |                                      |                             |  |             |
| Part       | 7: Sign Below  |                       |   |                                      |                             |  |             |
| For        | you  | I have ex             | amined this petition, and I declare u                                       | ınder penalty of p                   | erjury that the i           | information provided is true and correct.  |             |
|            |  |                       |   |                                      |                             | gible, under Chapter 7, 11,12, or 13 of title 11<br>d I choose to proceed under Chapter 7.   | ,           |
|            |  |                       | rney represents me and I did not pa<br>t, I have obtained and read the noti |                                      |                             | is not an attorney to help me fill out this b).  |             |
|            |  | I request             | relief in accordance with the chapte  | er of title 11, Unite                | ed States Code,             | e, specified in this petition.   |             |
|            |  | bankrupto<br>and 3571 | cy case can result in fines up to \$25                                      |                                      |                             | oney or property by fraud in connection with a co 20 years, or both. 18 U.S.C. §§ 152, 1341, | 1519,       |
|            |  |                       | m Edward Smith Edward Smith   |                                      | /s/ Laquisha<br>Laquisha Re | a Rena Smith   |             |
|            |  |                       | e of Debtor 1   |                                      | Signature of D              |  |             |
|            |  | Executed              | on <b>December 20, 2019</b>   |                                      | Executed on                 | December 20, 2019  |             |
|            |  |                       | MM / DD / YYYY  |                                      |                             | MM / DD / YYYY   | <del></del> |

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 7 of 62

| Debtor 1<br>Debtor 2 | Kariim Edward Sı<br>Laquisha Rena Sı | mith   | Page 7 of 62 | Case number (if known) |  |
|----------------------|--------------------------------------|--|--------------|------------------------|--|
|                      | ·                                    |  |              |                        |  |
|                      | attorney, if you are<br>ted by one   | I, the attorney for the debtor(s) named in thunder Chapter 7, 11, 12, or 13 of title 11, U |              |                        |  |

If you are not represented by an attorney, you do not need

to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Howard Kent                        | Date          | December 20, 2019        |
|--|---------------|--------------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY           |
| Howard Kent 415150                     |               |                          |
| Printed name                           |               |                          |
| THE KENT LAW FIRM                      |               |                          |
| Firm name                              |               |                          |
| 3355 Lenox Road                        |               |                          |
| Suite 600                              |               |                          |
| Atlanta, GA 30326                      |               |                          |
| Number, Street, City, State & ZIP Code |               |                          |
| Contact phone 404-504-7090             | Email address | hkent@thekentlawfirm.com |
| 415150 GA                              |               |                          |
| Bar number & State                     |               |                          |

| Fill in this information | mation to identify you                      |  |   |  |   |
|--------------------------|---|--|---|--|---|
| Debior                   | Kariim Edward S                             | Middle Name  | Last Name   |  |   |
| Debtor 2                 | Laquisha Rena                               |  |   |  |   |
| (Spouse if, filing)      | First Name                                  | Middle Name  | Last Name   |  |   |
| United States Ba         | inkruptcy Court for the:                    | NORTHERN DISTRICT C  | OF GEORGIA  |  |   |
| Case number _            |   |  |   |  |   |
| (if known)               |   |  |   | _  | Check if this is an amended filing                    |
|                          |   |  |   |  | amended ming  |
| Official Fo              | rm 107                                      |  |   |  |   |
|                          |   | Affairs for Individ  | luals Filing for B                                    | ankruntov  | 4/19  |
|                          |   |  |   |  |   |
| information. If n        | nore space is needed,                       | attach a separate sheet to   |   | equally responsible for sup<br>y additional pages, write you   |   |
| number (if know          | n). Answer every que                        | stion.   |   |  |   |
| Part 1: Give I           | Details About Your Ma                       | rital Status and Where You   | Lived Before  |  |   |
| 1. What is you           | r current marital statu                     | is?  |   |  |   |
| B. A. a. marka and       |   |  |   |  |   |
| ■ Married □ Not ma       | •   |  |   |  |   |
|                          |   | Baratan at an at an at an at   |   |  |   |
| 2. During the I          | ast 3 years, nave you                       | lived anywhere other than  | wnere you live now?                                   |  |   |
| ☐ No                     |   |  |   |  |   |
| Yes. Lis                 | st all of the places you l                  | ived in the last 3 years. Do no  | ot include where you live now                         | <i>I</i> .   |   |
| Debtor 1 P               | rior Address:                               | Dates Debtor 1 lived there   | Debtor 2 Prior Ad                                     | ldress:  | Dates Debtor 2<br>lived there                         |
| 675 Greer<br>Atlanta, G  | nwood Avenue, NE<br>iA 30306                | From-To:<br><b>2015 - August</b><br><b>2019</b>  | ■ Same as Debtor                                      | 1  | Same as Debtor 1 From-To:                             |
| states and territor  No  | ries include Arizona, Ca                    |  | vada, New Mexico, Puerto R                            | ity property state or territor<br>ico, Texas, Washington and V |   |
| Part 2 Expla             | in the Sources of You                       | r Income   |   |  |   |
| Fill in the total        | al amount of income yo                      | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | all businesses, including part-                       |  | ndar years?   |
| □ No                     |   |  |   |  |   |
| Yes. Fil                 | II in the details.                          |  |   |  |   |
|                          |   | Debtor 1   |   | Debtor 2   |   |
|                          |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions<br>and exclusions) |
|                          | of current year until<br>ed for bankruptcy: | ☐ Wages, commissions, bonuses, tips  | \$209,388.23  | ☐ Wages, commissions, bonuses, tips                            | \$0.00  |
|                          |   | Operating a business   |   | ☐ Operating a business   |   |
| Official Form 107        |   | Statement of Financial Aff   | airs for Individuals Filing for B                     | ankruptcy  | page  |

## Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 9 of 62

Debtor 2 Laquisha Rena Smith Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$24,000.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$0.00 \$1,320.00 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$24,000.00 ☐ Wages, commissions, \$0.00 Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business ☐ Wages, commissions. \$-200.00 ☐ Wages, commissions. \$0.00 bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For last calendar year: Other Gains (or \$-17,850.00 (January 1 to December 31, 2018) Losses) Additional Income \$136,294.00 Rent, Royalty, \$152,824.00 Partnership, Estate For the calendar year before that: Rent, Royalty, \$122,433.00 (January 1 to December 31, 2017) Partnership, Estate Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do

**Kariim Edward Smith** 

Debtor 1

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 10 of 62

**Kariim Edward Smith** Debtor 1 Debtor 2 Laquisha Rena Smith Case number (if known) not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. ☐ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe **Better Choice Real Estate** December 2019 \$3,350.00 \$0.00 ☐ Mortgage 1095 Old Roswell Road ☐ Car Suite C1 ☐ Credit Card Roswell, GA 30076 ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Residential lease. **Better Choice Real Estate** November 2019 \$3,350.00 \$0.00 □ Mortgage 1095 Old Roswell Road ☐ Car Suite C1 ☐ Credit Card Roswell, GA 30076 ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Residential lease. **Better Choice Real Estate** October 2019 \$3,350.00 \$0.00 ■ Mortgage 1095 Old Roswell Road ☐ Car Suite C1 ☐ Credit Card Roswell, GA 30076 ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Residential lease. **Mercedes-Benz Financial Services** December 2019 \$2,153.00 \$101,486.00 ■ Mortgage P.O. Box 961 Car Roanoke, TX 76262 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other **Mercedes-Benz Financial Services** November 2019 \$2,153.00 \$101,486.00 ■ Mortgage P.O. Box 961 Car Roanoke, TX 76262 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other **Mercedes-Benz Financial Services** October 2019 \$2,153.00 \$101,486.00 ■ Mortgage P.O. Box 961 ■ Car

Roanoke, TX 76262

☐ Credit Card
☐ Loan Repayment
☐ Suppliers or vendors

□ Other

| Creditor's Name and Address  | Dates of payment   | Total amount paid   | Amount you still owe  | Was this payment for  |
|--|--|---|---|---|
| OJC Properties, Inc.   | December 2019  | \$2,300.00  | \$0.00  | ☐ Mortgage  |
| 215 Piedmont Avenue  |  |   |   | ☐ Car   |
| Unit 1004  |  |   |   | ☐ Credit Card   |
| Atlanta, GA 30308  |  |   |   | ☐ Loan Repayment  |
|  |  |   |   | ☐ Suppliers or vendors  |
|  |  |   |   | ■ Other Business leas   |
| 0.10 Proceedings Inc.  | N  | 40.000.00   | 40.00   | _   |
| OJC Properties, Inc.   | November 2019  | \$2,300.00  | \$0.00  | ☐ Mortgage  |
| 215 Piedmont Avenue  |  |   |   | ☐ Car   |
| Unit 1004  |  |   |   | ☐ Credit Card   |
| Atlanta, GA 30308  |  |   |   | ☐ Loan Repayment  |
|  |  |   |   | ☐ Suppliers or vendors  |
|  |  |   |   | ■ Other Business leas   |
|  |  |   |   |   |
| OJC Properties, Inc.   | October 2019   | \$2,300.00  | \$0.00  | ☐ Mortgage  |
| 215 Piedmont Avenue  |  |   |   | ☐ Car   |
| Unit 1004  |  |   |   | ☐ Credit Card   |
| Atlanta, GA 30308  |  |   |   | ☐ Loan Repayment  |
|  |  |   |   | ☐ Suppliers or vendors  |
|  |  |   |   | ■ Other Business leas   |
|  |  |   |   |   |
| of which you are an officer, director, person  | in control, or owner of 20%  | or more of their votin  | erships of which yo<br>g securities; and a  | was an insider?  The are a general partner; corporate managing agent, including   |
|  | in control, or owner of 20%  | or more of their votin  | erships of which yo<br>g securities; and a  | u are a general partner; corporty<br>ny managing agent, including   |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.   | in control, or owner of 20%  | or more of their votin  | erships of which yo<br>g securities; and a  | u are a general partner; corporty<br>ny managing agent, including   |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No   | in control, or owner of 20%  | or more of their votin  | erships of which yo<br>g securities; and a  | u are a general partner; corporty managing agent, including   |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankruinsider?  | in control, or owner of 20%.  11 U.S.C. § 101. Include p  Dates of payment  ptcy, did you make any pa                    | or more of their votin<br>ayments for domestic<br>Total amount<br>paid                              | erships of which yog securities; and  | ou are a general partner; corporty managing agent, including s, such as child support and Reason for this payment   |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankru  | in control, or owner of 20%.  11 U.S.C. § 101. Include p  Dates of payment  ptcy, did you make any pa                    | or more of their votin<br>ayments for domestic<br>Total amount<br>paid                              | erships of which yog securities; and  | ou are a general partner; corports managing agent, including s, such as child support and Reason for this payment   |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankruinsider?  | in control, or owner of 20%.  11 U.S.C. § 101. Include p  Dates of payment  ptcy, did you make any pa                    | or more of their votin<br>ayments for domestic<br>Total amount<br>paid                              | erships of which yog securities; and  | ou are a general partner; corports managing agent, including s, such as child support and Reason for this payment   |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankruinsider?  Include payments on debts guaranteed or common the common of  | in control, or owner of 20%.  11 U.S.C. § 101. Include p  Dates of payment  ptcy, did you make any pa                    | or more of their votin<br>ayments for domestic<br>Total amount<br>paid                              | erships of which yog securities; and  | ou are a general partner; corports managing agent, including s, such as child support and Reason for this payment   |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankruinsider?  Include payments on debts guaranteed or co  | in control, or owner of 20%.  11 U.S.C. § 101. Include p  Dates of payment  ptcy, did you make any pa                    | Total amount ayments or transfer a  | erships of which yog securities; and  | ou are a general partner; corporty managing agent, including s, such as child support and Reason for this payment   |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankruinsider?  Include payments on debts guaranteed or company of the  | Dates of payment  Dates of payment  ptcy, did you make any payosigned by an insider.  Dates of payment                   | Total amount paid   | erships of which yog securities; and an export obligation  Amount you still owe any property on an Amount you                       | ru are a general partner; corport managing agent, including s, such as child support and  Reason for this payment ccount of a debt that benefit Reason for this payment |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankrupinsider?  Include payments on debts guaranteed or company the company to the company that the company that is a sole proprietor.   | Dates of payment  Dates of payment  ptcy, did you make any payosigned by an insider.  Dates of payment                   | Total amount paid  Total amount paid  Total amount paid   | erships of which yog securities; and an export obligation  Amount you still owe any property on an Amount you                       | ru are a general partner; corport managing agent, including s, such as child support and  Reason for this payment ccount of a debt that benefit Reason for this payment |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankruinsider?  Include payments on debts guaranteed or company of the  | Dates of payment  Dates of payment  ptcy, did you make any payosigned by an insider.  Dates of payment  Dates of payment | Total amount paid  ayments or transfer a Total amount paid  ayments or transfer a Total amount paid | Amount you still owe  Amount you still owe  Amount you still owe  Amount you any property on a                                      | are a general partner; corport managing agent, including s, such as child support and  Reason for this payment ccount of a debt that benefit lnclude creditor's name    |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or company of the c | Dates of payment  Dates of payment  ptcy, did you make any payosigned by an insider.  Dates of payment  Dates of payment | Total amount paid  ayments or transfer a Total amount paid  ayments or transfer a Total amount paid | Amount you still owe  Amount you still owe  Amount you still owe  Amount you any property on a                                      | are a general partner; corport managing agent, including s, such as child support and  Reason for this payment ccount of a debt that benefit lnclude creditor's name    |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or compared in the compared i | Dates of payment  Dates of payment  ptcy, did you make any payosigned by an insider.  Dates of payment  Dates of payment | Total amount paid  ayments or transfer a Total amount paid  ayments or transfer a Total amount paid | Amount you still owe  Amount you still owe  Amount you still owe  Amount you any property on a                                      | are a general partner; corporty managing agent, including s, such as child support and  Reason for this payment ccount of a debt that benefit lnclude creditor's name   |
| of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or company of the c | Dates of payment  Dates of payment  ptcy, did you make any payosigned by an insider.  Dates of payment  Dates of payment | Total amount paid  ayments or transfer a Total amount paid  ayments or transfer a Total amount paid | Amount you still owe  Amount you still owe  Amount you still owe  any property on an action, or administration suits, paternity and | are a general partner; corporty managing agent, including s, such as child support and  Reason for this payment ccount of a debt that benefit lnclude creditor's name   |

|       | btor 1<br>btor 2 | Kariim Edward Smith Laquisha Rena Smith   |           | Case number   | (if known)               |                          |
|-------|------------------|---|-----------|---|--------------------------|--------------------------|
| 10.   |                  | n 1 year before you filed for bankr<br>k all that apply and fill in the details b |           | vas any of your property repossessed, foreclosed  | I, garnished, attached   | I, seized, or levied?    |
|       |                  |   |           |   |                          |                          |
|       | _                | No. Go to line 11.  |           |   |                          |                          |
|       |                  | Yes. Fill in the information below.   | _         |   | _                        |                          |
|       | Cred             | litor Name and Address  |           | escribe the Property  | Date                     | Value of the<br>property |
|       |                  |   | EX        | plain what happened   |                          |                          |
| 11.   | acco             | unts or refuse to make a payment  |           | did any creditor, including a bank or financial in you owed a debt?   | stitution, set off any a | mounts from your         |
|       | _                | No  |           |   |                          |                          |
|       | □ \              | Yes. Fill in the details.   |           |   |                          |                          |
|       | Cred             | litor Name and Address  | De        | escribe the action the creditor took  | Date action was taken    | Amount                   |
| 2.    |                  | n 1 year before you filed for bankr<br>-appointed receiver, a custodian,          |           | vas any of your property in the possession of an er official?   | assignee for the bene    | fit of creditors, a      |
|       |                  | No  |           |   |                          |                          |
|       |                  | Yes   |           |   |                          |                          |
| Pai   | rt 5:            | List Certain Gifts and Contribution   | ns        |   |                          |                          |
| 13.   | Withi            | n 2 years before you filed for bank   | ruptcy,   | did you give any gifts with a total value of more t   | han \$600 per person?    | ?                        |
|       |                  | No  |           |   |                          |                          |
|       |                  | Yes. Fill in the details for each gift.   |           |   |                          |                          |
|       |                  | s with a total value of more than \$6   | 600       | Describe the gifts  | Dates you gave the gifts | Value                    |
|       |                  | on to Whom You Gave the Gift and  | d         |   |                          |                          |
|       |                  |   |           |   |                          | ****                     |
| 14.   | _                |   | ruptcy,   | did you give any gifts or contributions with a total  | al value of more than    | \$600 to any charity?    |
|       |                  | No<br>Yes. Fill in the details for each gift or                                   | contribut | tion  |                          |                          |
|       |                  |   |           |   | D-1                      | Malara                   |
|       | more             | s or contributions to charities that<br>e than \$600<br>rity's Name               | total     | Describe what you contributed   | Dates you contributed    | Value                    |
|       |                  | ress (Number, Street, City, State and ZIP Co                                      | de)       |   |                          |                          |
| Pai   | rt 6:            | List Certain Losses   |           |   |                          |                          |
| 15.   |                  | n 1 year before you filed for bankr<br>mbling?                                    | uptcy o   | r since you filed for bankruptcy, did you lose any  | thing because of thef    | t, fire, other disaster  |
|       | or ya            | momig:  |           |   |                          |                          |
|       |                  | No  |           |   |                          |                          |
|       |                  | Yes. Fill in the details.   |           |   |                          |                          |
|       |                  | cribe the property you lost and the loss occurred                                 |           | ibe any insurance coverage for the loss e the amount that insurance has paid. List pending  | Date of your loss        | Value of property lost   |
|       |                  |   | insura    | nce claims on line 33 of Schedule A/B: Property.  |                          |                          |
| Pa    | rt 7:            | List Certain Payments or Transfe  | rs        |   |                          |                          |
| 16.   | cons             | ulted about seeking bankruptcy or   | prepari   | id you or anyone else acting on your behalf pay on the backruptcy petition?  rs, or credit counseling agencies for services require |                          | rty to anyone you        |
|       |                  | No  |           |   |                          |                          |
|       | _                | Yes. Fill in the details.   |           |   |                          |                          |
|       |                  | on Who Was Paid   |           | Description and value of any property   | Date payment             | Amount of                |
|       | Addı             |   |           | transferred   | or transfer was          | payment                  |
|       |                  | il or website address   | V         |   | made                     | , ,                      |
| \t#:  |                  | on Who Made the Payment, if Not   |           | of Einangial Affaira for Individuals Filips for Barlington  |                          |                          |
| סודוכ | ial Form         | 1 10 <i>1</i> St  | atement   | of Financial Affairs for Individuals Filing for Bankruptcy  |                          | page \$                  |

Debtor 1 Kariim Edward Smith Debtor 2 Laquisha Rena Smith

Case number (if known)

|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You  | ress transferred ail or website address  |  | erty                 | Date payment<br>or transfer was<br>made   | Amount of payment                             |  |
|-----|--|--|--|----------------------|---|---|--|
|     | THE KENT LAW FIRM<br>3355 Lenox Road<br>Suite 600<br>Atlanta, GA 30326<br>hkent@thekentlawfirm.com   | \$995.00 - Attor<br>\$335.00 - Cour<br>\$110.00 - Cred                                 | t Filing Fees                              |                      | November 21,<br>2019  | \$1,440.00                                    |  |
| 17. | Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you  | s or to make payment   | lse acting on your<br>ts to your creditors | behalf pay o<br>s?   | r transfer any prope  | rty to anyone who                             |  |
|     | ■ No   |  |  |                      |   |   |  |
|     | ☐ Yes. Fill in the details.  |  |  |                      |   |   |  |
|     | Person Who Was Paid<br>Address   | Description and transferred  | value of any prope                         | erty                 | Date payment<br>or transfer was<br>made   | Amount of payment                             |  |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details. |  |  |                      |   |   |  |
|     | Person Who Received Transfer   | Description and  | value of                                   | Doscribo             | any property or   | Date transfer was                             |  |
|     | Address  |  |  |                      | received or debts   | made  |  |
|     | Person's relationship to you   |  |  |                      |   |   |  |
|     | RBM of Atlanta, Inc.<br>7640 Roswell Road<br>Atlanta, GA 30350   | well Road Jeep Wrangler in order to 2016 J<br>GA 30350 obtain a 2015 Mercedes order to |  | 2016 Jee<br>order to | The debtors traded in a 2018 2016 Jeep Wrangler in order to obtain a 2015 Mercedes G-550. |   |  |
|     | Car dealership   | 0-330.   |  | wer cede.            | eues G-330.   |   |  |
| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.  |  | ny property to a se                        | elf-settled tru      | ıst or similar device   | of which you are a                            |  |
|     | Name of trust  | Description and  | value of the prope                         | erty transferr       | ed  | Date Transfer was                             |  |
|     | name of trust  | 2000 i piron ana   | value of the prope                         | arty transform       | <b></b>   | made  |  |
| Par | t 8: List of Certain Financial Accounts, Inst  | ruments, Safe Depos  | it Boxes, and Stor                         | age Units            |   |   |  |
| 20. | <ul> <li>Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?</li> <li>Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.</li> <li>No</li> </ul>                                  |  |  |                      |   | , ,   |  |
|     |  | Last 4 digits of account number  | Type of accoun instrument                  | clo                  | te account was<br>sed, sold,<br>oved, or<br>nsferred                                      | Last balance<br>before closing or<br>transfer |  |
|     |  |  |  |                      |   |   |  |

Debtor 1 Kariim Edward Smith Laquisha Rena Smith

Case number (if known)

| 21.   | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? |   |  |                       |  |  |  |  |
|---|--|---|--|-----------------------|--|--|--|--|
|   | ■ No □ Yes. Fill in the details.   |   |  |                       |  |  |  |  |
|   | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)  | Who else had access to it? Address (Number, Street, City, State and ZIP Code)                 | Describe the contents                  | Do you still have it? |  |  |  |  |
| 22.   | Have you stored property in a storage unit or p  | lace other than your home within 1  | year before you filed for bankruptcy?  |                       |  |  |  |  |
|   | No   |   |  |                       |  |  |  |  |
|   | Yes. Fill in the details.  |   |  |                       |  |  |  |  |
|   | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  | Who else has or had access<br>to it?<br>Address (Number, Street, City,<br>State and ZIP Code) | Describe the contents                  | Do you still have it? |  |  |  |  |
| Par   | 19: Identify Property You Hold or Control for  | Someone Else  |  |                       |  |  |  |  |
| 23.   | Do you hold or control any property that some for someone.   | one else owns? Include any proper   | ty you borrowed from, are storing for, | or hold in trust      |  |  |  |  |
|   | ■ No   |   |  |                       |  |  |  |  |
|   | ☐ Yes. Fill in the details.  |   |  |                       |  |  |  |  |
|   | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)                       | Describe the property                  | Value                 |  |  |  |  |
| Par   | t 10: Give Details About Environmental Inform  | ation   |  |                       |  |  |  |  |
| For   | the purpose of Part 10, the following definitions  | apply:  |  |                       |  |  |  |  |
|   | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su                    | ir, land, soil, surface water, ground   | - ·                                    |                       |  |  |  |  |
|   | Site means any location, facility, or property as to own, operate, or utilize it, including disposal   | defined under any environmental I   | aw, whether you now own, operate, o    | r utilize it or used  |  |  |  |  |
|   | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or  |   | waste, hazardous substance, toxic s    | ubstance,             |  |  |  |  |
| Rep   | ort all notices, releases, and proceedings that ye   | ou know about, regardless of when   | they occurred.                         |                       |  |  |  |  |
| 24.   | Has any governmental unit notified you that you  | u may be liable or potentially liable   | under or in violation of an environme  | ntal law?             |  |  |  |  |
|   | ■ No   |   |  |                       |  |  |  |  |
|   | ☐ Yes. Fill in the details.  |   |  |                       |  |  |  |  |
|   | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code)                    | Environmental law, if you know it      | Date of notice        |  |  |  |  |
| 25. Have you notified any governmental unit of any release of hazardous material? |  |   |  |                       |  |  |  |  |
|   | ■ No   |   |  |                       |  |  |  |  |
|   | Yes. Fill in the details.  |   |  |                       |  |  |  |  |
|   | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State and ZIP Code)                          | Environmental law, if you know it      | Date of notice        |  |  |  |  |
|   |  |   |  |                       |  |  |  |  |

| Debtor :             |   |   | Case number (if known)   |                 |  |  |  |  |  |
|----------------------|---|---|--|-----------------|--|--|--|--|--|
| ?6. Ha√              | ave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  |   |  |                 |  |  |  |  |  |
| _                    | No<br>Yes. Fill in the details.   |   |  |                 |  |  |  |  |  |
|                      | ase Title<br>ase Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case Stat  | tus of the<br>e |  |  |  |  |  |
| Part 11              | : Give Details About Your Business or   | Connections to Any Business   |  |                 |  |  |  |  |  |
| 27. Wit              | /ithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time |   |  |                 |  |  |  |  |  |
|                      | ■ A member of a limited liability comp  | pany (LLC) or limited liability partners                                | hip (LLP)  |                 |  |  |  |  |  |
|                      | ☐ A partner in a partnership  |   |  |                 |  |  |  |  |  |
|                      | ☐ An officer, director, or managing executive of a corporation  |   |  |                 |  |  |  |  |  |
|                      | ☐ An owner of at least 5% of the votin  | g or equity securities of a corporation                                 | n  |                 |  |  |  |  |  |
|                      | ☐ No. None of the above applies. Go to Part 12.   |   |  |                 |  |  |  |  |  |
|                      | Yes. Check all that apply above and fil   | I in the details below for each busine                                  | ss.  |                 |  |  |  |  |  |
|                      | usiness Name<br>Idress  | Describe the nature of the business                                     | Employer Identification number Do not include Social Security number or ITII   |                 |  |  |  |  |  |
|                      | Imber, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper  | Dates business existed   |                 |  |  |  |  |  |
|                      | ody by Kariim, LLC  | Personal Training   | EIN: ***-**8678  |                 |  |  |  |  |  |
| Sı                   | 31 Marietta Blvd., NW<br>uite A<br>:lanta, GA 30318   | N/A   | From-To 2008 - present   |                 |  |  |  |  |  |
| ins:                 | thin 2 years before you filed for bankrup<br>titutions, creditors, or other parties.  No Yes. Fill in the details below.  ame ddress umber, Street, City, State and ZIP Code)   | tcy, did you give a financial statemen  Date Issued                     | t to anyone about your business? Include all   | financial       |  |  |  |  |  |
| Part 12              | : Sign Below  |   |  |                 |  |  |  |  |  |
| are true<br>with a b |   | false statement, concealing property                                    | and I declare under penalty of perjury that the<br>r, or obtaining money or property by fraud in<br>20 years, or both. |                 |  |  |  |  |  |
|                      | iim Edward Smith  | /s/ Laquisha Rena Smith   | <u> </u>   |                 |  |  |  |  |  |
|                      | n Edward Smith<br>ure of Debtor 1   | Laquisha Rena Smith<br>Signature of Debtor 2                            |  |                 |  |  |  |  |  |
| •                    | December 20, 2019   | Date December 20, 20  | 19   |                 |  |  |  |  |  |
| Did you<br>■ No      | ·   |   | Filing for Bankruptcy (Official Form 107)?   |                 |  |  |  |  |  |
| ☐ Yes                |   |   |  |                 |  |  |  |  |  |
| Did you<br>■ No      | pay or agree to pay someone who is no   | t an attorney to help you fill out bank                                 | ruptcy forms?  |                 |  |  |  |  |  |
| ☐ Yes.               | Name of Person Attach the Bankru  | uptcy Petition Preparer's Notice, Declara                               | tion, and Signature (Official Form 119).   |                 |  |  |  |  |  |
|                      |   |   |  |                 |  |  |  |  |  |

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 16 of 62

|                     |                                | Document                        | Page 16 of 62   |  |                                       |
|---------------------|--------------------------------|---------------------------------|---|--|---------------------------------------|
| Fill in this info   | rmation to identify your ca    | ase and this filing:            |   |  |                                       |
| Dobtor 1            | Kariim Edward Cm               | :41-                            |   |  |                                       |
| Debtor 1            | Kariim Edward Sm First Name    | Middle Name                     | Last Name   |  |                                       |
| Debtor 2            | Laquisha Rena Sm               |                                 | <u> Laot Hamo</u>   |  |                                       |
| (Spouse, if filing) | First Name                     | Middle Name                     | Last Name   |  |                                       |
|                     |                                | IODTHEDN DIOTDIOT OF            | 0500014   |  |                                       |
| United States B     | ankruptcy Court for the:       | NORTHERN DISTRICT OF            | GEORGIA   |  |                                       |
| Case number         |                                |                                 |   |  | ☐ Check if this is an                 |
|                     |                                |                                 |   |  | amended filing                        |
|                     |                                |                                 |   |  | -                                     |
| ~ <b>.</b> -        | 4004/5                         |                                 |   |  |                                       |
| Official Fo         | orm 106A/B                     |                                 |   |  |                                       |
| Schedu              | le A/B: Prope                  | ertv                            |   |  | 12/15                                 |
|                     |                                |                                 | If an accept fits in mare than  | and actorious list the accet in                      |                                       |
|                     |                                |                                 | <ul> <li>If an asset fits in more than a<br/>eople are filing together, both a</li> </ul> |  |                                       |
| nformation. If mo   | ore space is needed, attach a  |                                 | on the top of any additional pag  |  |                                       |
| Answer every que    | estion.                        |                                 |   |  |                                       |
| Part 1: Describe    | e Each Residence, Building, I  | Land, or Other Real Estate Yo   | u Own or Have an Interest In  |  |                                       |
|                     |                                |                                 |   |  |                                       |
| Do you own or       | have any legal or equitable in | nterest in any residence, build | ding, land, or similar property?  | •  |                                       |
| No. Go to Pa        | art 2                          |                                 |   |  |                                       |
| _                   |                                |                                 |   |  |                                       |
| ☐ Yes. Where        | is the property?               |                                 |   |  |                                       |
|                     |                                |                                 |   |  |                                       |
| Part 2: Describe    | e Your Vehicles                |                                 |   |  |                                       |
|                     |                                |                                 |   |  |                                       |
|                     |                                |                                 | es, whether they are regist   |  | ehicles you own that                  |
| someone else dr     | rives. If you lease a vehicle, | also report it on Schedule (    | G: Executory Contracts and U  | Jnexpired Leases.                                    |                                       |
| 3. Cars, vans, t    | rucks, tractors, sport utili   | ty vehicles, motorcycles        |   |  |                                       |
| _                   | -                              |                                 |   |  |                                       |
| □ No                |                                |                                 |   |  |                                       |
| Yes                 |                                |                                 |   |  |                                       |
|                     |                                |                                 |   |  |                                       |
| 3.1 Make:           | Mercedes                       | Who has an interest             | in the property? Check one  | Do not deduct secured cl                             |                                       |
| Model:              | G-550                          | Debtor 1 only                   |   | the amount of any secure<br>Creditors Who Have Clair |                                       |
| Year:               | 2015                           | Debtor 2 only                   |   |  | me eccarea sy rieperty.               |
| Approxima           | ate mileage: 28,0              |                                 | or 2 only   | Current value of the<br>entire property?             | Current value of the portion you own? |
| Other info          |                                | At least one of the             | •   | citile property:                                     | portion you own.                      |
|                     | ased on Kelley Blue            | At least one of the             | debiois and another   |  |                                       |
| Book.               | acca on itolicy Blac           | ☐ Check if this is co           | mmunity property  | \$65,974.00  | \$65,974.00                           |
| Locatio             | n: 2544 Sibley Drive, N        |                                 | ,, ,  |  |                                       |
| Atlanta             | GA 30324                       |                                 |   |  |                                       |
|                     |                                |                                 |   |  |                                       |
| 3.2 Make:           | Audi                           | Who has an interest             | in the property? Check one  | Do not deduct secured cl                             |                                       |
| Model:              | A3                             | Debtor 1 only                   | F F, 1 OHOOK OHO  | the amount of any secure<br>Creditors Who Have Clair |                                       |
|                     | 2016                           | ´                               |   | Crountors will Have Oldi                             | mo occared by 1 toperty.              |
| Year:               |                                | Debtor 2 only                   |   | Current value of the                                 | Current value of the                  |
| • • •               | ate mileage: 20,00             |                                 |   | entire property?                                     | portion you own?                      |
| Other info          |                                | At least one of the             | debtors and another   |  |                                       |
| Book.               | ased on Kelley Blue            | ☐ Check if this is co           | nmunity property  | \$14,119.00  | \$14,119.00                           |
|                     | n: 2544 Sibley Drive, N        |                                 | minumity property   |  | +,                                    |
|                     | CA 20224                       | <b>-,</b>                       |   |  |                                       |

## Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 17 of 62

|     | ebtor 1<br>ebtor 2              | Kariim Edwa<br>Laquisha Re                               |  |   | Case number (if known)            |   |
|-----|---------------------------------|--|--|---|-----------------------------------|---|
| ı   | Watercra<br>Examples ■ No □ Yes | <b>aft, aircraft, mot</b><br>s: Boats, trailers,         | or homes, ATVs and other remotors, personal watercraft, fis                      | creational vehicles, other vehicles, hing vessels, snowmobiles, motorcycl | and accessories<br>le accessories |   |
| 5   |                                 |  |  | your entries from Part 2, including er here                               |                                   | \$80,093.00   |
| Pa  | rt 3: Des                       | scribe Your Perso  | nal and Household Items  |   |                                   |   |
|     | •                               | ·  | egal or equitable interest in a  | ny of the following items?  |                                   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6.  | Example No                      | old goods and fi<br>es: Major applian<br>Describe        | urnishings ces, furniture, linens, china, kito Used household goods.             | chenware  |                                   |   |
|     |                                 |  |  | ive, NE, Atlanta GA 30324   |                                   | \$1,500.00  |
|     |                                 |  | Used furniture from Affir<br>Location: 2544 Sibley Dr                            | m, Inc.<br>ive, NE, Atlanta GA 30324                                      |                                   | \$1,000.00  |
| 7.  | _ No                            | es: Televisions a  | nd radios; audio, video, stereo, phones, cameras, media playe  Used electronics. | and digital equipment; computers, pri                                     | nters, scanners; music co         | ollections; electronic devices  |
|     |                                 |  |  | ive, NE, Atlanta GA 30324   |                                   | \$1,000.00  |
| 8.  | Example  No                     |  | figurines; paintings, prints, or o<br>ons, memorabilia, collectibles             | ther artwork; books, pictures, or other                                   | art objects; stamp, coin,         | or baseball card collections;   |
| 9.  | Example  No                     | ent for sports ar<br>es: Sports, photo<br>musical instru | graphic, exercise, and other hol   | bby equipment; bicycles, pool tables,                                     | golf clubs, skis; canoes a        | and kayaks; carpentry tools;  |
| 10. | ■ No                            |  | s, shotguns, ammunition, and re  | elated equipment  |                                   |   |
| 11. | □ No Î                          |  | othes, furs, leather coats, design   | ner wear, shoes, accessories  |                                   |   |
|     |                                 |  | Used clothes.<br>Location: 2544 Sibley Dr  | ive, NE, Atlanta GA 30324   |                                   | \$300.00  |

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 18 of 62

|    | btor 1<br>btor 2   |                                    | n Edwa<br>sha Rei |           |  |   | Case numl  | ber (if known)   |   |
|----|--------------------|------------------------------------|-------------------|-----------|--|---|--|------------------|---|
|    | □ No É             |                                    |                   | Old je    | welry.                                     |   | rings, heirloom jewelry, watc                    | ches, gems, g    | old, silver   |
|    |                    |                                    |                   | Locat     | ion: 2544 Sibley I                         | Orive, NE, Atlanta G                                | iA 30324   |                  | \$200.00  |
|    | Examp<br>□ No<br>- | rm anima<br>bles: Dogs<br>Describe | s, cats, b        | oirds, ho | rses                                       |   |  |                  |   |
|    |                    |                                    |                   | One d     |  | Drive, NE, Atlanta G                                | A 30324  |                  | \$0.00  |
|    | ■ No               | -                                  |                   |           | •  | not already list, includ                            | ling any health aids you d                       | id not list      |   |
|    | ☐ Yes.             | Give spe                           | ecific info       | rmation   |  |   |  |                  |   |
| 15 |                    |                                    |                   |           |  | art 3, including any ei                             | ntries for pages you have a                      | attached         | \$4,000.00  |
| Pa | rt 4: Des          | scribe Yo                          | ur Financ         | ial Asset | ts   |   |  |                  |   |
| Do | you ow             | n or hav                           | e any le          | gal or e  | quitable interest in                       | any of the following?                               |  |                  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|    | ■ No               |                                    |                   |           | our wallet, in your ho                     |   | ox, and on hand when you f                       | ïle your petitic | on  |
|    | Examp              |                                    | cking, sa         |           |  | ounts; certificates of depwith the same institution | posit; shares in credit unions<br>on, list each. | s, brokerage h   | ouses, and other similar  |
|    | □ No<br>■ Yes      |                                    |                   |           |  | Institution name                                    | :  |                  |   |
|    | — 100              |                                    |                   | 17.1.     | Checking & Savings                         | Chase   |  |                  | \$1,600.00  |
|    |                    |                                    |                   | 17.2.     | Checking &<br>Savings                      | Wells Fargo   |  |                  | \$0.00  |
|    |                    |                                    |                   |           | cly traded stocks<br>ent accounts with bro | kerage firms, money m                               | narket accounts                                  |                  |   |
|    |                    |                                    |                   |           | Institution or issuer                      | name:   |  |                  |   |
|    |                    | ublicly tra<br>enture              | aded sto          | ock and   | interests in incorpo                       | prated and unincorpo                                | rated businesses, includin                       | ng an interes    | t in an LLC, partnership, and   |
|    |                    | Give spe                           | ecific info       |           | about them                                 |   | % of own   | ership:          |   |

Document Page 19 of 62

|     | btor 1<br>btor 2          | Kariim Edw<br>Laquisha Ro            |   |   | Case number (if known)              |   |
|-----|---------------------------|--------------------------------------|---|---|-------------------------------------|---|
|     | Negotia<br>Non-ne<br>■ No | able instrument<br>egotiable instrun | s include personal checks, casi<br>nents are those you cannot trai                | tiable and non-negotiable instrum<br>hiers' checks, promissory notes, and<br>nsfer to someone by signing or deliv | d money orders.                     |   |
|     | ⊔ res. (                  | Give specific in                     | ormation about them<br>Issuer name:   |   |                                     |   |
|     |                           | nent or pension<br>les: Interests in |   | 03(b), thrift savings accounts, or other  | er pension or profit-sharing plans  | ÷   |
|     |                           | List each accou                      | nt separately.  Type of account:  | Institution name:   |                                     |   |
|     | Your sh                   |                                      | ed deposits you have made so  | that you may continue service or us<br>public utilities (electric, gas, water), to                                |                                     | or others   |
|     |                           |                                      |   | Institution name or individual:   |                                     |   |
|     |                           |                                      | Security Deposit  | Landlord  |                                     | \$6,700.00  |
|     | Annuiti ■ No □ Yes        | `                                    | or a periodic payment of mone   | y to you, either for life or for a numbe  | er of years)                        |   |
| 24. | Interest                  | s in an educati<br>C. §§ 530(b)(1),  | 529A(b), and 529(b)(1).   | ualified ABLE program, or under a   |                                     | n.  |
|     | Trusts,<br>■ No           | equitable or fu                      | ture interests in property (of  | ther than anything listed in line 1),   | , and rights or powers exercisa     | able for your benefit   |
|     | ☐ Yes.                    | Give specific in                     | formation about them  |   |                                     |   |
|     |                           |                                      | rademarks, trade secrets, an<br>main names, websites, proceed                     | d other intellectual property ds from royalties and licensing agree   | ements                              |   |
|     | ☐ Yes.                    | Give specific in                     | formation about them  |   |                                     |   |
|     | Examp<br>■ No             | oles: Building pe                    | and other general intangible rmits, exclusive licenses, coop formation about them | s<br>erative association holdings, liquor li  | censes, professional licenses       |   |
| Мс  | oney or p                 | oroperty owed                        | to you?   |   |                                     | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|     | No                        | unds owed to y                       |   |   |                                     |   |
|     | ⊔ Yes. (                  | Give specific inf                    | ormation about them, including  | g whether you already filed the return  | is and the tax years                |   |
|     | •                         | support<br>bles: Past due or         | lump sum alimony, spousal so  | upport, child support, maintenance, o   | divorce settlement, property settle | ement   |

☐ Yes. Give specific information.....

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 20 of 62

| Debtor 1<br>Debtor 2 | Kariim Edward Smith Laquisha Rena Smith   | Case number (if known)                                 |                            |
|----------------------|---|--|----------------------------|
|                      | amounts someone owes you  ples: Unpaid wages, disability insurance payments, disab  benefits; unpaid loans you made to someone else                       | ility benefits, sick pay, vacation pay, workers' compe | nsation, Social Security   |
|                      | Give specific information   |  |                            |
|                      | sts in insurance policies  ples: Health, disability, or life insurance; health savings a  | ccount (HSA); credit, homeowner's, or renter's insurar | nce                        |
|                      | Name the insurance company of each policy and list its Company name:  | value.<br>Beneficiary:                                 | Surrender or refund value: |
| If you some          | aterest in property that is due you from someone who are the beneficiary of a living trust, expect proceeds from one has died.  Give specific information |  | eive property because      |
| Exan<br>■ No         | s against third parties, whether or not you have filed a ples: Accidents, employment disputes, insurance claims,  |  |                            |
| 34. <b>Other</b>     | Describe each claim  contingent and unliquidated claims of every nature, i  Describe each claim   | ncluding counterclaims of the debtor and rights to     | set off claims             |
| ■ No                 | nancial assets you did not already list  Give specific information  |  |                            |
|                      | the dollar value of all of your entries from Part 4, inclu<br>lart 4. Write that number here  |  | \$8,300.00                 |
| Part 5: D            | escribe Any Business-Related Property You Own or Have an  | Interest In. List any real estate in Part 1.           |                            |
| 37. <b>Do yo</b> ι   | own or have any legal or equitable interest in any business-  | related property?                                      |                            |
| No. 0                | o to Part 6.  |  |                            |
| ☐ Yes.               | Go to line 38.  |  |                            |
|                      | escribe Any Farm- and Commercial Fishing-Related Property you own or have an interest in farmland, list it in Part 1.                                     | You Own or Have an Interest In.                        |                            |
|                      | u own or have any legal or equitable interest in any fa<br>. Go to Part 7.  | rm- or commercial fishing-related property?            |                            |
| ☐ Ye                 | s. Go to line 47.   |  |                            |
| Part 7:              | Describe All Property You Own or Have an Interest in Tha  | t You Did Not List Above                               |                            |
|                      | u have other property of any kind you did not already ples: Season tickets, country club membership   | list?  |                            |
|                      | Give specific information   |  |                            |
| E4 <b>A</b> dd       | the dellar value of all of your entries from Part 7. Write  | a that number here                                     | \$0.00                     |

## Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 21 of 62

**Kariim Edward Smith** Debtor 1 Debtor 2 Laquisha Rena Smith Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$0.00 Part 2: Total vehicles, line 5 56. \$80,093.00 Part 3: Total personal and household items, line 15 57. \$4,000.00 Part 4: Total financial assets, line 36 58. \$8,300.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$92,393.00 \$92,393.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$92,393.00

## Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 22 of 62

| Fill in this inform                     | Fill in this information to identify your case: |                   |            |  |                                      |  |  |
|---|---|-------------------|------------|--|--------------------------------------|--|--|
| Debtor 1                                | Kariim Edward Sı                                | mith              |            |  |                                      |  |  |
|   | First Name                                      | Middle Name       | Last Name  |  |                                      |  |  |
| Debtor 2                                |   |                   |            |  |                                      |  |  |
| (Spouse if, filing)                     | First Name                                      | Middle Name       | Last Name  |  |                                      |  |  |
| United States Bankruptcy Court for the: |   | NORTHERN DISTRICT | OF GEORGIA |  |                                      |  |  |
| Case number                             |   |                   |            |  | ☐ Check if this is an amended filing |  |  |
|   |   |                   |            |  | amended ming                         |  |  |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  |                                      |  |                                    |  |  |  |
|----|--|--------------------------------------|--|------------------------------------|--|--|--|
|    | ■ You are claiming state and federal nonbank   | ruptcy exemptions. 11                | U.S.C. § 522(b)(3)                     |                                    |  |  |  |
|    | ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)                                       |                                      |  |                                    |  |  |  |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. |                                      |  |                                    |  |  |  |
|    | Brief description of the property and line on<br>Schedule A/B that lists this property             | Current value of the portion you own | Amount of the exemption you claim      | Specific laws that allow exemption |  |  |  |
|    |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption. |                                    |  |  |  |
|    |  |                                      |  |                                    |  |  |  |

|   | Copy the value from<br>Schedule A/B | Che | eck only one box for each exemption.                            |                            |  |
|---|-------------------------------------|-----|---|----------------------------|--|
| ebtor 1 Exemptions<br>Used household goods.<br>Location: 2544 Sibley Drive, NE, | \$1,500.00                          |     | \$750.00  | O.C.G.A. § 44-13-100(a)(4) |  |
| Atlanta GA 30324 Line from Schedule A/B: 6.1                                    |                                     |     | 100% of fair market value, up to any applicable statutory limit |                            |  |
| Used electronics.<br>Location: 2544 Sibley Drive, NE,                           | \$1,000.00                          |     | \$500.00  | O.C.G.A. § 44-13-100(a)(4) |  |
| Atlanta GA 30324<br>Line from Schedule A/B: 7.1                                 |                                     |     | 100% of fair market value, up to any applicable statutory limit |                            |  |
| Used clothes.<br>Location: 2544 Sibley Drive, NE,                               | \$300.00                            |     | \$150.00  | O.C.G.A. § 44-13-100(a)(4) |  |
| Atlanta GA 30324 Line from Schedule A/B: 11.1                                   |                                     |     | 100% of fair market value, up to any applicable statutory limit |                            |  |
| Old jewelry.<br>Location: 2544 Sibley Drive, NE,                                | \$200.00                            |     | \$100.00  | O.C.G.A. § 44-13-100(a)(5) |  |
| Atlanta GA 30324 Line from Schedule A/B: 12.1                                   |                                     |     | 100% of fair market value, up to any applicable statutory limit |                            |  |
| Checking & Savings: Chase Line from Schedule A/B: 17.1                          | \$1,600.00                          |     | \$800.00  | O.C.G.A. § 44-13-100(a)(6) |  |
| Life from Goriodale PVD. 11.1   |                                     |     | 100% of fair market value, up to any applicable statutory limit |                            |  |

|    | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am     | ount of the exemption you claim                                 | Specific laws that allow exemption |
|----|---|--------------------------------------|--------|---|------------------------------------|
|    |   | Copy the value from<br>Schedule A/B  | Che    | eck only one box for each exemption.                            |                                    |
|    | Security Deposit: Landlord Line from Schedule A/B: 22.1                             | \$6,700.00                           |        | \$3,350.00  | O.C.G.A. § 44-13-100(a)(6)         |
|    | Lille Hotti Schedule AVD. 22.1  |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every  |                                      |        | led on or after the date of adjustme                            | nt.)                               |
|    | ■ No  |                                      |        |   |                                    |
|    | ☐ Yes. Did you acquire the property cover   | ed by the exemption wi               | thin 1 | ,215 days before you filed this case                            | 9?                                 |
|    | □ No  |                                      |        |   |                                    |
|    | ☐ Yes   |                                      |        |   |                                    |

## Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 24 of 62

| Fill in this info                       | rmation to identify your | case:             |            |                       |
|---|--------------------------|-------------------|------------|-----------------------|
| Debtor 1                                |                          |                   |            |                       |
|   | First Name               | Middle Name       | Last Name  |                       |
| Debtor 2                                | Laquisha Rena S          | mith              |            |                       |
| (Spouse if, filing)                     | First Name               | Middle Name       | Last Name  |                       |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT | OF GEORGIA |                       |
| Case number                             |                          |                   |            | ☐ Check if this is an |
|   |                          |                   |            | amended filing        |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property                                  | Current value of the portion you own | Amount of the exemption you claim   | Specific laws that allow exemption |
|---|--------------------------------------|---|------------------------------------|
|   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption.                                    |                                    |
| Debtor 2 Exemptions Used household goods. Location: 2544 Sibley Drive, NE, Atlanta GA 30324 Line from Schedule A/B: 6.1 | \$1,500.00                           | \$750.00  100% of fair market value, up to any applicable statutory limit | O.C.G.A. § 44-13-100(a)(4)         |
| Used electronics. Location: 2544 Sibley Drive, NE, Atlanta GA 30324 Line from Schedule A/B: 7.1                         | \$1,000.00                           | \$500.00  100% of fair market value, up to any applicable statutory limit | O.C.G.A. § 44-13-100(a)(4)         |
| Used clothes. Location: 2544 Sibley Drive, NE, Atlanta GA 30324 Line from Schedule A/B: 11.1                            | \$300.00                             | \$150.00  100% of fair market value, up to any applicable statutory limit | O.C.G.A. § 44-13-100(a)(4)         |
| Old jewelry. Location: 2544 Sibley Drive, NE, Atlanta GA 30324 Line from Schedule A/B: 12.1                             | \$200.00                             | \$100.00  100% of fair market value, up to any applicable statutory limit | O.C.G.A. § 44-13-100(a)(5)         |
| Checking & Savings: Chase<br>Line from Schedule A/B: 17.1   | \$1,600.00                           | \$800.00  100% of fair market value, up to any applicable statutory limit | O.C.G.A. § 44-13-100(a)(6)         |

Official Form 106C

|    | Brief description of the property and line on<br>Schedule A/B that lists this property |                                     |   | Specific laws that allow exemption |  |
|----|--|-------------------------------------|---|------------------------------------|--|
|    |  | Copy the value from<br>Schedule A/B | Check only one box for each exemption.                            |                                    |  |
|    | Security Deposit: Landlord Line from Schedule A/B: 22.1                                | ·                                   |   | O.C.G.A. § 44-13-100(a)(6)         |  |
|    | Ene nom oshodalo 702. EE   |                                     | ☐ 100% of fair market value, up to any applicable statutory limit |                                    |  |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every     |                                     |   | ent.)                              |  |
|    | No   |                                     |   |                                    |  |
|    | Yes. Did you acquire the property cover  | red by the exemption wi             | hin 1,215 days before you filed this cas                          | e?                                 |  |
|    | ☐ Yes  |                                     |   |                                    |  |
|    |  |                                     |   |                                    |  |

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 26 of 62

|   |                            | Document Pag   | je 26 d     | of 62                 |                        |               |
|---|----------------------------|--|-------------|-----------------------|------------------------|---------------|
| Fill in this inform                       | nation to identify yoເ     | ır case:   |             |                       |                        |               |
| Debtor 1                                  | Kariim Edward              | Smith  |             |                       |                        |               |
|   | First Name                 | Middle Name Last N   | lame        |                       |                        |               |
| Debtor 2                                  | Laquisha Rena              | Smith  |             |                       |                        |               |
| (Spouse if, filing)                       | First Name                 | Middle Name Last N   | lame        |                       |                        |               |
| United States Ba                          | nkruptcy Court for the     | NORTHERN DISTRICT OF GEORGI  | A           |                       |                        |               |
| Case number                               |                            |  |             |                       |                        |               |
| (if known)                                |                            |  |             |                       | ☐ Check                | if this is an |
|   |                            |  |             |                       | ameno                  | led filing    |
| O#:=:=!                                   | - 100D                     |  |             |                       |                        |               |
| Official Forn                             | <del></del>                |  | _           |                       |                        |               |
| Schedule                                  | D: Creditors               | s Who Have Claims Sec  | ured        | by Propert            | У                      | 12/15         |
| is needed, copy the<br>number (if known). | e Additional Page, fill it | If two married people are filing together, bot<br>out, number the entries, and attach it to this<br>y your property? |             |                       |                        |               |
| ☐ No. Check                               | k this box and submit t    | his form to the court with your other sched  | ules. You   | u have nothing else t | o report on this form. |               |
| _   | all of the information     | •  |             | o o                   | •                      |               |
|   |                            | below.   |             |                       |                        |               |
|   | II Secured Claims          |  |             | Column A              | Column B               | Column C      |
|   |                            | more than one secured claim, list the creditor se<br>s a particular claim, list the other creditors in Par           |             | Amount of claim       | Value of collateral    | Unsecured     |
|   |                            | cal order according to the creditor's name.  | . 2. 7 10   | Do not deduct the     | that supports this     | portion       |
| O. 4. Affirma Ima                         |                            | Describe the manager that account the sleet  |             | value of collateral.  | claim                  | If any        |
| 2.1 Affirm Inc                            |                            | Describe the property that secures the clai  | <u>m:</u> – | \$2,454.00            | \$1,000.00             | \$1,454.00    |
|   |                            | Used furniture from Affirm, Inc.<br>Location: 2544 Sibley Drive, NE,<br>Atlanta GA 30324                             |             |                       |                        |               |
|   | corporated                 | As of the date you file, the claim is: Check a   | l that      |                       |                        |               |
| Po Box 72                                 |                            | apply.   |             |                       |                        |               |
|   | cisco, CA 94104            | ☐ Contingent   |             |                       |                        |               |
| Number, Street                            | t, City, State & Zip Code  | Unliquidated   |             |                       |                        |               |
| Who owes the de                           | ht? Chack one              | ☐ Disputed  Nature of lien. Check all that apply.  |             |                       |                        |               |
| _   | BUT CHECK ONE.             | _  |             | d                     |                        |               |
| ■ Debtor 1 only                           |                            | An agreement you made (such as mortgage car loan)  | je or secui | rea                   |                        |               |
| Debtor 2 only                             |                            |  |             |                       |                        |               |
| ☐ Debtor 1 and De                         | •                          | ☐ Statutory lien (such as tax lien, mechanic's   | lien)       |                       |                        |               |
|   | he debtors and another     | Judgment lien from a lawsuit   |             |                       |                        |               |
| ☐ Check if this cl<br>community de        |                            | Other (including a right to offset)  | l           |                       |                        |               |
|   | Opened<br>06/19 Last       |  |             |                       |                        |               |

Last 4 digits of account number

**KGJR** 

Active

Date debt was incurred 9/21/19

## Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 27 of 62

| Debtor 1   | Kariim Ed                       | ward Smith           |   | (              | Case number (if known)     |             |                              |
|------------|---------------------------------|----------------------|---|----------------|----------------------------|-------------|------------------------------|
|            | First Name                      | Middle Na            | ame Last Name   | -              |                            |             |                              |
| Debtor 2   | Laquisha<br>First Name          | Rena Smith Middle Na | ame Last Name   | -              |                            |             |                              |
|            | riist ivame                     | wilddie in           | arne Last Name  |                |                            |             |                              |
| 2.2 Me     | rcedes-Ben                      | z Financial          |   |                | 4404 400 00                | 405.054.00  | <b>*** * * * * * * * * *</b> |
| Sei        | rvices                          |                      | Describe the property that secures the  |                | \$101,486.00               | \$65,974.00 | \$35,512.00                  |
| Cred       | litor's Name                    |                      | 2015 Mercedes G-550 28,000  |                |                            |             |                              |
|            |                                 |                      | Value based on Kelley Blue B  |                |                            |             |                              |
|            |                                 |                      | Location: 2544 Sibley Drive,<br>Atlanta GA 30324                              | INE,           |                            |             |                              |
|            | n: Bankrup<br>Box 685           | tcy Dept             | As of the date you file, the claim is: 0                                      | heck all that  |                            |             |                              |
|            | anoke, TX 7                     | 6262                 | apply.  |                |                            |             |                              |
|            | ber, Street, City, S            |                      | ☐ Contingent☐ Unliquidated  |                |                            |             |                              |
| Num        | ber, offeet, only, c            | nate & Zip Code      | ☐ Disputed  |                |                            |             |                              |
| Who owe    | s the debt? C                   | heck one.            | Nature of lien. Check all that apply.   |                |                            |             |                              |
| ☐ Debtor   | 1 only                          |                      | ☐ An agreement you made (such as m  | nortgage or se | cured                      |             |                              |
| ☐ Debtor   | •                               |                      | car loan)   | 0 0            |                            |             |                              |
| ☐ Debtor   | 1 and Debtor 2                  | only                 | ☐ Statutory lien (such as tax lien, med                                       | hanic's lien)  |                            |             |                              |
| At leas    | t one of the deb                | tors and another     | ☐ Judgment lien from a lawsuit  |                |                            |             |                              |
| ☐ Check    | if this claim re                | lates to a           | Other (including a right to offset)   | Automobil      | e Loan                     |             |                              |
| comm       | nunity debt                     |                      | , , , _   |                |                            |             |                              |
|            |                                 | Opened               |   |                |                            |             |                              |
|            |                                 | 11/28/18             |   |                |                            |             |                              |
|            |                                 | <b>Last Active</b>   |   |                |                            |             |                              |
| Date debt  | was incurred                    | 10/13/19             | Last 4 digits of account numb   | er 2001        |                            |             |                              |
| 22 1/0     | lkowogon C                      | radit Ina            | Describe the property that secures the  | o oloimi       | \$24.704.00                | \$14 110 00 | \$10,585.00                  |
|            | Ikswagen C<br>litor's Name      | realt, inc           | Describe the property that secures the 2016 Audi A3 20,000 miles              | ie Ciaiiii.    | \$24,704.00                | \$14,119.00 | \$10,565.00                  |
|            |                                 |                      | Value based on Kelley Blue B  | Book.          |                            |             |                              |
|            |                                 |                      | Location: 2544 Sibley Drive,  |                |                            |             |                              |
| Att        | n: Bankrup                      | tcv                  | Atlanta GA 30324  |                |                            |             |                              |
|            | Box 3                           | ,                    | As of the date you file, the claim is: Capply.                                | check all that |                            |             |                              |
| Hill       | lboro, OR 9                     | 7123                 | ☐ Contingent  |                |                            |             |                              |
| Num        | ber, Street, City, S            | state & Zip Code     | ☐ Unliquidated  |                |                            |             |                              |
|            |                                 |                      | ☐ Disputed  |                |                            |             |                              |
|            | s the debt? C                   | heck one.            | Nature of lien. Check all that apply.   |                |                            |             |                              |
| Debtor     | 1 only                          |                      | An agreement you made (such as m  | ortgage or see | cured                      |             |                              |
| Debtor     | 2 only                          |                      | car loan)   |                |                            |             |                              |
| _          | 1 and Debtor 2                  | =                    | Statutory lien (such as tax lien, med   | hanic's lien)  |                            |             |                              |
| _          |                                 | tors and another     | ☐ Judgment lien from a lawsuit  |                | . •                        |             |                              |
|            | if this claim re<br>nunity debt | elates to a          | Other (including a right to offset)   | Automobil      | e Loan                     |             |                              |
| COIIII     | iainty acot                     |                      |   |                |                            |             |                              |
|            |                                 | Opened               |   |                |                            |             |                              |
|            |                                 | 10/19 Last           |   |                |                            |             |                              |
| Date debt  | was incurred                    | Active<br>11/03/19   | Last 4 digits of account numb   | er 4373        |                            |             |                              |
|            |                                 |                      |   |                |                            |             |                              |
|            |                                 |                      |   |                |                            |             |                              |
|            |                                 |                      |   |                |                            |             |                              |
| Add the    | dollar value of                 | f your entries in C  | olumn A on this page. Write that numb   | er here:       | \$128,644.0                | 0           |                              |
| If this is |                                 | of your form, add    | olumn A on this page. Write that numb the dollar value totals from all pages. | er here:       | \$128,644.0<br>\$128,644.0 |             |                              |

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| Debto | r 1 Kariim Edwa   | ard Smith  |           | Case number (if known)   |
|-------|---|--|-----------|--|
|       | First Name  | Middle Name  | Last Name |  |
| Debto | r 2 Laquisha Re   | ena Smith  |           |  |
|       | First Name  | Middle Name  | Last Name |  |
|       | Name, Number, Stree<br>Affirm, Inc.<br>650 California S<br>Floor 12<br>San Francisco, |  |           | On which line in Part 1 did you enter the creditor?                                  |
|       |   | et, City, State & Zip Code<br>Financial Services<br>3262 |           | On which line in Part 1 did you enter the creditor?                                  |
|       | Name, Number, Stree<br>VW Credit, Inc.<br>2333 Waukeega<br>Deerfield, IL 600          |  |           | On which line in Part 1 did you enter the creditor?  Last 4 digits of account number |
|       | VW Credit, Inc.<br>2333 Waukeega  | ın Road  |           | ,  |

## Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 29 of 62

|                          |  |   |                                | Document                                    | Page 29 of 6   | 52                       |                 |            |                             |        |
|--------------------------|--|---|--------------------------------|---|--|--------------------------|-----------------|------------|-----------------------------|--------|
| Fill in th               | is informatio                                      | n to identify your c                                  | ase:                           |   |  |                          |                 |            |                             |        |
| Debtor 1                 | K  | ariim Edward Sm                                       | nith                           |   |  |                          |                 |            |                             |        |
|                          |  | st Name   | Middle                         | Name  | Last Name  |                          |                 |            |                             |        |
| Debtor 2                 |  | aquisha Rena Sm                                       |                                |   |  |                          |                 |            |                             |        |
| (Spouse if,              | filing) Fir  | st Name   | Middle                         | Name  | Last Name  |                          |                 |            |                             |        |
| United S                 | states Bankrup                                     | otcy Court for the:                                   | NORTHER                        | RN DISTRICT OF (                            | GEORGIA  |                          |                 |            |                             |        |
| Case nu                  | mber   |   |                                |   |  |                          |                 |            |                             |        |
| (if known)               |  |   |                                | _   |  |                          |                 |            | if this is ar<br>led filing | 1      |
|                          | l Form 10  |   |                                |   |  |                          |                 |            |                             |        |
| Sched                    | dule E/F:  | <b>Creditors WI</b>                                   | ho Have                        | e Unsecured                                 | d Claims   |                          |                 |            | 12/15                       | 5      |
| Schedule<br>left. Attacl | D: Creditors W<br>h the Continual<br>case number ( | ho Have Claims Secution Page to this page (if known). | red by Prope<br>e. If you have | erty. If more space is no information to r  | . Do not include any cre<br>is needed, copy the Pari<br>report in a Part, do not f                       | t you need, fill it out, | number the      | entries in | n the boxes                 | on the |
| Part 1:                  | List All of  | Your PRIORITY Uns                                     | secured Cla                    | aims  |  |                          |                 |            |                             |        |
|                          | •  | ve priority unsecured                                 | claims agai                    | nst you?                                    |  |                          |                 |            |                             |        |
|                          | o. Go to Part 2.                                   |   |                                |   |  |                          |                 |            |                             |        |
| ■ Ye                     |  |   |                                |   |  |                          |                 |            |                             |        |
| identi<br>possi          | ify what type of o                                 | claim it is. If a claim has                           | both priority according to     | and nonpriority amount the creditor's name. | riority unsecured claim, lis<br>unts, list that claim here a<br>If you have more than tw<br>s in Part 3. | and show both priority a | and nonpriori   | ty amount  | ts. As much                 | as     |
| (For a                   | an explanation o                                   | of each type of claim, se                             | ee the instruct                | tions for this form in t                    | he instruction booklet.)   |                          |                 |            |                             |        |
|                          |  |   |                                |   |  | Total claim              | Priority amount |            | Nonpriorit amount           | ty     |
|                          |  | nent of Revenue                                       | ı                              | Last 4 digits of acco                       | ount number  | \$3,000.00               |                 | 00.00      |                             | \$0.00 |
|                          | Priority Creditor's<br>Compliance                  |   | ,                              | When was the debt                           | incurred?  |                          |                 |            |                             |        |
|                          |  | ry Blvd. Suite 162                                    | 208                            |   |  |                          | _               |            |                             |        |
|                          | Atlanta, GA  | 30345<br>City State Zip Code                          |                                | As of the date you fi                       | ile, the claim is: Check a   | all that apply           |                 |            |                             |        |
|                          |  | debt? Check one.                                      | _                              | Contingent                                  | ne, the claim is. Check a  | ын инас арріу            |                 |            |                             |        |
|                          | Debtor 1 only                                      |   |                                | ☐ Unliquidated                              |  |                          |                 |            |                             |        |
|                          | Debtor 2 only                                      |   |                                | Disputed                                    |  |                          |                 |            |                             |        |
| <b>.</b>                 | Debtor 1 and De                                    | ehtor 2 only  |                                | Disputed<br>Type of PRIORITY u              | insecured claim:   |                          |                 |            |                             |        |
| _                        |  | he debtors and another                                |                                | ☐ Domestic support                          |  |                          |                 |            |                             |        |
|                          |  | aim is for a communi                                  |                                | _   | other debts you owe the  | gavernment               |                 |            |                             |        |
|                          | he claim subjec                                    |   | •                              |   | or personal injury while yo  | •                        |                 |            |                             |        |
| J.                       | =  |   |                                | Other. Specify                              | , , , ,  |                          |                 |            |                             |        |
|                          | Yes  |   | •                              | ' ' —                                       | Гах Debt   |                          |                 |            |                             |        |
|                          |  |   |                                |   |  |                          |                 |            |                             |        |

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 30 of 62

| Priority Creditor's Name 401 W. Peachtree St. NW Stop 334-D Atlanta, GA 30308 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Debtor 1 only Disputed Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Tax Debt  Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  | Debto<br>Debto | r 1 Kariim Edward Smith r 2 Laquisha Rena Smith   | Case number (if known)                      |  |   |                             |  |  |
|--|----------------|---|---|--|---|-----------------------------|--|--|
| Pilotrity Creditor's Name 401 W. Peachtree St. NW Stop 334-D Atlanta, GA 30308 Number Street City State Zip Code Who incurred the debt? Check one.   Contingent   Debtor 1 only  | 2.2            | Internal Revenue Service  | Last 4 digits of account number             | \$20,000.00                            | \$20,000.00   | \$0.00                      |  |  |
| Atlanta, GA 30308 Number Street City State Zip Code Who incurred the debt? Check one.   Contingent   Debtor 1 and Debtor 2 only   Disputed   Debtor 1 and Debtor 2 only   Domestic support obligations   Domestic support |                | 401 W. Peachtree St.  | When was the debt incurred?                 |  |   |                             |  |  |
| Who incurred the debt? Check one.  |                | •   |   |  |   |                             |  |  |
| Debtor 1 only  |                | Number Street City State Zip Code   | As of the date you file, the claim is:      | Check all that apply                   |   |                             |  |  |
| Debtor 2 only  |                |   | ☐ Contingent                                |  |   |                             |  |  |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  Taxes and certain other debts you owe the government Claims to death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims Tax Debt  Tax Debt Tax Debt for each or personal injury while you death injury t | l              | ☐ Debtor 1 only   | ☐ Unliquidated                              |  |   |                             |  |  |
| At least one of the debtors and another   Domestic support obligations   Taxes and certain other debts you owe the government     It is the claim subject to offset?   Tax Debt  | [              | Debtor 2 only   | ☐ Disputed                                  |  |   |                             |  |  |
| Taxes and certain other debts you owe the government is the claim is for a community debt is the claim subject to offset?  □ No □ Yes □ Yes □ Tax Debt  Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? □ No. You have nothing to report in this part. Submit this form to the court with your other schedules. □ Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims afrieady included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  ■ Amex ■ Correspondence/Bankruptcy Po Box 981540 ■ Past 2. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? ■ No ■ No ■ Debtor 1 only □ Debtor 2 only □ Debtor 3 and Debtor 2 only □ Debtor 4 debtors and another □ Check if this claim is for a community debt is the claim subject to offset? ■ No   | ı              | Debtor 1 and Debtor 2 only  | Type of PRIORITY unsecured claim:           |  |   |                             |  |  |
| Is the claim subject to offset? No Other. Specify Tax Debt  Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor has a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Number Street (it) State Zip Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Student loans Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts   | [              | $\square$ At least one of the debtors and another   | ☐ Domestic support obligations              |  |   |                             |  |  |
| No   | [              | ☐ Check if this claim is for a community debt   | Taxes and certain other debts you of        | owe the government                     |   |                             |  |  |
| Ves   Tax Debt   | l              | s the claim subject to offset?  | ☐ Claims for death or personal injury       | while you were intoxicated             |   |                             |  |  |
| Part 2: List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.   A. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    Amex   |                |   |   |  |   |                             |  |  |
| 3. Do any creditors have nonpriority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.   | [              | Yes   | Tax Debt                                    |  |   |                             |  |  |
| Amex Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 EI Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another At least one of the debtors and another Is the claim subject to offset? No No Debtor 2 only Debtor 2 only Debtor 3 one of the debtors and another Is the claim subject to offset? Debtor 3 one of the debtors and another Is the claim subject to offset? Debtor 4 one of the debtors and another Is the claim subject to offset? Debtor 5 one of the debtors and another Is the claim subject to offset? Debtor 5 one of the debtors and another Is the claim subject to offset? Debtor 6 one of the debtors and another Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts   | un<br>tha      | secured claim, list the creditor separately for each cl<br>an one creditor holds a particular claim, list the other | aim. For each claim listed, identify what t | ype of claim it is. Do not list claims | already included in Pa<br>s fill out the Continuation | rt 1. If more<br>on Page of |  |  |
| Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 EI Paso, TX 79998  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  No  No  Debtor 1 onfset  Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Debtor 2 onfset? Debtor 2 onfset? Debtor 3 onfset Debtor 4 onfset Debtor 5 onfset Debtor 6 of the debtors and another Debtor 6 offset Debtor 7 onfset Debtor 8 onfset Debtor 9 on | 4 1            | Λmov  | Last 4 digits of account number             | 1563                                   | Total old   |                             |  |  |
| □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts   | 4.1            | Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998                               | When was the debt incurred?                 | Opened 11/18 Last Act 11/13/19         | ive   | <b>\$303.00</b>             |  |  |
| □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts  |                | Who incurred the debt? Check one.   |   |  |   |                             |  |  |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts  |                | Debtor 1 only   | ☐ Contingent                                |  |   |                             |  |  |
| □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts   |                | Debtor 2 only   | ☐ Unliquidated                              |  |   |                             |  |  |
| □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts   |                | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed                                  |  |   |                             |  |  |
| debt    Obligations arising out of a separation agreement or divorce that you did not report as priority claims   No   |                | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecured               | l claim:                               |   |                             |  |  |
| Is the claim subject to offset?  ■ No  Debts to pension or profit-sharing plans, and other similar debts   |                |   | _   |  |   |                             |  |  |
| ■ No □ Debts to pension or profit-sharing plans, and other similar debts   |                |   |   | ration agreement or divorce that ye    | ou did not  |                             |  |  |
| ☐ Yes ☐ Other. Specify Credit Card   |                | <u> </u>  |   | g plans, and other similar debts       |   |                             |  |  |
|  |                | □Yes  | ■ Other. Specify Credit Card                |  |   |                             |  |  |

| Armox Correspondence(Bankruptcy Po Box 981540   Paso, TX 7998  | Debtor 2 | Kariim Edward Smith Laquisha Rena Smith               |                                      | Case number (if known)                       |             |
|--|----------|---|--------------------------------------|--|-------------|
| El Paso, TX 79998   Number Street City State 2 fix Code   Monitor first City State 2 fix Code   Monitor City   |          | Nonpriority Creditor's Name Correspondence/Bankruptcy | . •                                  | Opened 05/17 Last Active                     | \$139.00    |
| Number Street City State 2 pC Ocide   Who incurred the debty? Check one.   Debtor 1 only   Contingent   Uniquidated     Debtor 2 only   Uniquidated     Debtor 2 only   Uniquidated     Debtor 2 only   Uniquidated     Debtor 3 apoint 2 pcore of NonPRIORITY unsecured claim:     Student loans   Student loans        |          |   | when was the dept incurred?          | 10/24/19                                     |             |
| Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor    | _        | Number Street City State Zip Code                     | As of the date you file, the claim i | s: Check all that apply                      |             |
| At least one of the debtors and another   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is to a community debt   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is to a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check   |          | _   |                                      |  |             |
| Check if this claim is for a community debt   Student loans   Check if this claim subject to offset?   Contingent   Check if this claim is for a community debt   Capital One   Nopprointy Creditors Name   Check if this claim is for a community debt   Capital Cap   Capital Card   Capital Card   Capital Card   Capital Cap   Check if this claim is for a community debt   Capital Cap   Capital Card   Capital Card   Capital Cap   Capital Card   Capital Cap   Capital Card   Capital Cap   Capital Card   Capital Cap   Capital Capi   |          | ☐ Debtor 1 and Debtor 2 only                          | ☐ Disputed                           |  |             |
| Cricek in this claim is for a community debt   Capital One   Capital One   Capital One   Capital One   Capital One   Capital Cone   Capital   |          | ☐ At least one of the debtors and another             | Type of NONPRIORITY unsecured        | I claim:                                     |             |
| debt   |          | ☐ Check if this claim is for a community              | ☐ Student loans                      |  |             |
| A3   Barclays Bank Delaware   Last 4 digits of account number   Attr.: Correspondence   Po Box 8801   Wilmington, DE 19899   As of the date you file, the claim is: Check all that apply   As of the date incurred the debt of 1 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 2 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 8 only   Debtor 8 only   Debtor 9 only 1 only 1 only 1 only 1 only 1 only 2 only   Debtor 9 only 1 only 2 only 2 only   Debtor 9 only 1 only 2 only 2 only 2 only   Debtor 9 only 1 only 2 only    |          | debt  |                                      | ration agreement or divorce that you did not |             |
| 4.3   Barclays Bank Delaware   Last 4 digits of account number   8121   \$4,256.00   |          | ■ No  | Debts to pension or profit-sharin    | g plans, and other similar debts             |             |
| Atn: Correspondence Po Box 8801 Wilmington, DE 19899 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 and Debtor 2 only Debtor 1 sis the claim is for a community debt Debtor 1 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt Student loans Disputed Type of NoNPRIORITY unsecured claim: Contingent Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Disputed Type of NoNPRIORITY unsecured claim: Disputed Debtor 1 only Disputed Type of NoNPRIORITY unsecured claim: Disputed Debtor 1 only Debtor 9 only Disputed Type of NoNPRIORITY unsecured claim: Disputed Debtor 1 only Claims Debtor 1 only Claims Disputed Debtor 1 only Claims Debtor 1 onl |          | Yes   | Other. Specify Credit Card           |  |             |
| Attn: Correspondence Po Box 8801 Wilmington, DE 19899 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 she claim subject to offset? Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 o |          |   | Last 4 digits of account number      | 8121   | \$4,256.00  |
| Number Street City State Zip Code   As of the date you file, the claim is: Check all that apply   Number Street City State Zip Code   Pobbor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Disputed   Type of NONPRIORITY unsecured claim:   Student loans   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 3 only   Debtor 1 offset?   Student loans   Debtor 1 offset?   Debtor 1 offset?   Debtor 1 offset?   Debtor 2 only   Debtor 3 only Credit Card   Debtor 3 only 1 only 1 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only 1 only    |          | Attn: Correspondence<br>Po Box 8801                   | When was the debt incurred?          |  |             |
| Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt No Debtor 1 only Other. Specify Credit Card  Att. Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Suddent loans  At least one of the debtors and another Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Suddent loans  Other. Specify Credit Card  Opened 11/17 Last Active 11/11/19  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Suddent loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Suddent loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Disputed Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 priority claims Debtor 4 beta 5 priority claims Debtor 4 beta 6 beta 6 proving claims Debtor 4 beta 6 proving claims Debtor 4 beta 6 proving claims Debtor 5 proving claims Debtor 6 proving claims Debtor 9 pr | _        | Number Street City State Zip Code                     | As of the date you file, the claim i | s: Check all that apply                      |             |
| Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt No Debtor 1 only Other. Specify Credit Card  Attr. Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 the scalam is for a community debt Debtor 4 the scalam is for a community debt Debtor 5 the claim subject to offset? Debtor 6 person or profit-sharing plans, and other similar debts  Vinitial Sudern to ans Debtor 6 as paration agreement or divorce that you did not report as priority claims Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 o |          | ■ Debtor 1 only                                       | ☐ Contingent                         |  |             |
| At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims or profit-sharing plans, and other similar debts    At least one of the debtors and another  |          | Debtor 2 only   |                                      |  |             |
| Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim subject to offset?   Credit Card   |          | ☐ Debtor 1 and Debtor 2 only                          | ☐ Disputed                           |  |             |
| debt   Steel claim subject to offset?   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts  |          | ☐ At least one of the debtors and another             | Type of NONPRIORITY unsecured        | I claim:                                     |             |
| Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card     Other. Specify Credit Card   |          | ☐ Check if this claim is for a community              | ☐ Student loans                      |  |             |
| Yes  |          |   |                                      |  |             |
| Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debts 4 digits of account number 9859  Salt Jake City (Depended 11/17 Last Active 11/11/19  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Opened 11/17 Last Active 11/11/19  As of the date you file, the claim is: Check all that apply  Check all that apply  Type of NonPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts  |          | ■ No  | Debts to pension or profit-sharin    | g plans, and other similar debts             |             |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  No  No  No  Debtor 1 onfset Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Debtor 1 onfset? Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Debtor 2 onfset? Debtor 3 only Debtor 4 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Debtor 3 only Debtor 4 only Debtor 4 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 9 |          | Yes   | Other. Specify Credit Card           | <u> </u>                                     |             |
| Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  Opened 11/17 Last Active 11/11/19  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Disputed Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts   |          |   | Last 4 digits of account number      | 9859   | \$14,322.00 |
| Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Debts do separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts   |          | Attn: Bankruptcy<br>Po Box 30285                      | When was the debt incurred?          |  |             |
| □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts   | _        | Number Street City State Zip Code                     | As of the date you file, the claim i | s: Check all that apply                      |             |
| □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts  |          | _   |                                      |  |             |
| □ Debtor 1 and Debtor 2 only □ Disputed  □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  □ No □ Debts to pension or profit-sharing plans, and other similar debts   |          | _   |                                      |  |             |
| □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts   |          | _   |                                      |  |             |
| ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts   |          | ,   |                                      | l claim:                                     |             |
| debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts   |          | _   | ···                                  | i ciaiii.                                    |             |
| ■ No □ Debts to pension or profit-sharing plans, and other similar debts   |          | debt  | ☐ Obligations arising out of a sepa  | ration agreement or divorce that you did not |             |
|  |          | ·   | <u>-</u> · · · ·                     | g plans, and other similar debts             |             |
|  |          |   | Other. Specify Credit Card           |  |             |

|     | 1 Kariim Edward Smith<br>12 Laquisha Rena Smith                                    |  | Case number (if known)                       |            |
|-----|--|--|--|------------|
| 4.5 | Capital One  | Last 4 digits of account number                              | 9361   | \$2,657.00 |
|     | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred?                                  | Opened 03/16 Last Active 11/15/19            |            |
|     | Number Street City State Zip Code Who incurred the debt? Check one.                | As of the date you file, the claim i                         | s: Check all that apply                      |            |
|     | ■ Debtor 1 only  | ☐ Contingent   |  |            |
|     | Debtor 2 only  | ☐ Unliquidated   |  |            |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|     | $\square$ At least one of the debtors and another                                  | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|     | ☐ Check if this claim is for a community   | ☐ Student loans  |  |            |
|     | debt<br>Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|     | ■ No   | ☐ Debts to pension or profit-sharin                          | g plans, and other similar debts             |            |
|     | Yes  | Other. Specify Credit Card                                   | <u> </u>                                     |            |
| 4.6 | Capital One Nonpriority Creditor's Name  | Last 4 digits of account number                              | 7147   | \$1,730.00 |
|     | Attn: Bankruptcy<br>Po Box 30285   | When was the debt incurred?                                  | Opened 05/15 Last Active 11/04/19            |            |
|     | Salt Lake City, UT 84130  Number Street City State Zip Code                        | As of the date you file, the claim i                         |  |            |
|     | Who incurred the debt? Check one.  | _  |  |            |
|     | Debtor 1 only  | ☐ Contingent   |  |            |
|     | ■ Debtor 2 only  | ☐ Unliquidated   |  |            |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|     | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|     | Check if this claim is for a community   | ☐ Student loans  |  |            |
|     | debt Is the claim subject to offset?   | report as priority claims                                    | ration agreement or divorce that you did not |            |
|     | ■ No   | Debts to pension or profit-sharing                           |  |            |
|     | Yes  | Other. Specify Credit Card                                   | <u> </u>                                     |            |
| 4.7 | Citibank North America Nonpriority Creditor's Name                                 | Last 4 digits of account number                              | 6046   | \$2,977.00 |
|     | Citibank SD MC 425<br>5800 South Corp Place  | When was the debt incurred?                                  | Opened 11/11 Last Active 10/21/19            |            |
|     | Sioux Falls, SD 57108  Number Street City State Zip Code                           | As of the date you file, the claim i                         |  |            |
|     | Who incurred the debt? Check one.  | As of the date you me, the claim                             | s. Oneck all that apply                      |            |
|     | Debtor 1 only  | ☐ Contingent   |  |            |
|     | ☐ Debtor 2 only  | ☐ Unliquidated   |  |            |
|     | ☐ Debtor 1 and Debtor 2 only   | Disputed   |  |            |
|     | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                |  |            |
|     | ☐ Check if this claim is for a community   | ☐ Student loans  |  |            |
|     | debt   | Obligations arising out of a sepa                            |  |            |
|     | Is the claim subject to offset?  | report as priority claims  Debts to pension or profit-sharin |  |            |
|     | ■ No   |  |  |            |
|     | Yes  | ■ Other. Specify Credit Card                                 | <u> </u>                                     |            |

| Comenity Bkl/Ulta  | Last 4 digits of account number                                | 5100   | \$39.00     |
|--|--|--|-------------|
| Nonpriority Creditor's Name Attn: Bankruptcy Dept                                  |  | Opened 10/19 Last Active   |             |
| Po Box 182125<br>Columbus, OH 43218  | When was the debt incurred?                                    | 11/09/19   |             |
| Number Street City State Zip Code  | As of the date you file, the claim i                           | s: Check all that apply  |             |
| Who incurred the debt? Check one.  |  |  |             |
| Debtor 1 only  | ☐ Contingent   |  |             |
| Debtor 2 only  | ☐ Unliquidated   |  |             |
| Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |             |
| At least one of the debtors and another  | Type of NONPRIORITY unsecured                                  | claim:   |             |
| ☐ Check if this claim is for a community   | ☐ Student loans  |  |             |
| lebt<br>s the claim subject to offset?   | Obligations arising out of a sepa<br>report as priority claims | ration agreement or divorce that you did not   |             |
| No   | Debts to pension or profit-sharin                              | g plans, and other similar debts   |             |
| ☐Yes   | Other. Specify Charge Acc                                      | count  |             |
| Comenitybank/West Elm  | Last 4 digits of account number                                | 1897   | \$764.00    |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept                                  |  | Opened 06/19 Last Active   |             |
| Po Box 182125  | When was the debt incurred?                                    | 10/19/19   |             |
| Columbus, OH 43218   |  |  |             |
| Number Street City State Zip Code  Who incurred the debt? Check one.               | As of the date you file, the claim i                           | s: Cneck all that apply  |             |
| ☐ Debtor 1 only  | ☐ Contingent   |  |             |
| Debtor 2 only  | <del>-</del>   |  |             |
| _  | ☐ Unliquidated   |  |             |
| Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecured                      | l claim:   |             |
| At least one of the debtors and another  | Student loans  | i ciaiii.  |             |
| ☐ Check if this claim is for a community<br>lebt                                   | _  | ration agreement or divorce that you did not   |             |
| s the claim subject to offset?   | report as priority claims                                      | ration agreement of divorce that you did not   |             |
| No   | ☐ Debts to pension or profit-sharin                            | g plans, and other similar debts   |             |
| ☐Yes   | ■ Other. Specify Charge Acc                                    | count  |             |
| Department of Education/Nelnet   |  | 0472   | \$36,897.00 |
| Ionpriority Creditor's Name  | Last 4 digits of account number                                |  | φ30,097.00  |
| Attn: Claims   |  | Opened 08/10 Last Active   |             |
| Po Box 82505   | When was the debt incurred?                                    | 10/31/19   |             |
| Lincoln, NE 68501  Number Street City State Zip Code                               | As of the date you file, the claim i                           | S. Chook all that apply  |             |
| Who incurred the debt? Check one.  | As of the date you file, the Claim I                           | э. Опеск ан шасарріу   |             |
| ☐ Debtor 1 only  | ☐ Contingent   |  |             |
| Debtor 2 only  | ☐ Unliquidated   |  |             |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only                                       | ☐ Disputed   |  |             |
| At least one of the debtors and another  | Type of NONPRIORITY unsecured                                  | claim:   |             |
| ☐ At least one or the debtors and another ☐ Check if this claim is for a community | Student loans  |  |             |
| ⊒ Check if this claim is for a community lebt                                      | _  | ration agreement or divorce that you did not   |             |
| s the claim subject to offset?   | report as priority claims                                      | and the state of t |             |
| No   | Debts to pension or profit-sharin                              | g plans, and other similar debts   |             |
|  |  |  |             |

|          | 1 Kariim Edward Smith 2 Laquisha Rena Smith   | Case number (if known)  |  |             |  |
|----------|---|---|--|-------------|--|
| 4.1      | Department of Education/Nelnet  | Last 4 digits of account number   | 0372   | \$25,229.00 |  |
|          | Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501                     | When was the debt incurred?   | Opened 08/10 Last Active 10/31/19            |             |  |
|          | Number Street City State Zip Code  Who incurred the debt? Check one.                        | As of the date you file, the claim i  | s: Check all that apply                      |             |  |
|          | Debtor 1 only   | ☐ Contingent  |  |             |  |
|          | ■ Debtor 2 only   | ☐ Unliquidated  |  |             |  |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |             |  |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured   | d claim:                                     |             |  |
|          | ☐ Check if this claim is for a community  | Student loans   |  |             |  |
|          | debt Is the claim subject to offset?  | Obligations arising out of a sepa report as priority claims                   | ration agreement or divorce that you did not |             |  |
|          | ■ No  | Debts to pension or profit-sharin   |  |             |  |
|          | Yes   | ☐ Other. Specify  |  |             |  |
|          |   | Educationa  | I  |             |  |
| 4.1<br>2 | Discover Financial  | Last 4 digits of account number   | 0144   | \$9,978.00  |  |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850   | When was the debt incurred?   | Opened 05/17 Last Active 11/03/19            |             |  |
|          | Number Street City State Zip Code  Who incurred the debt? Check one.                        | As of the date you file, the claim i  |  |             |  |
|          | _   | Пол   |  |             |  |
|          | Debtor 1 only   | ☐ Contingent  |  |             |  |
|          | Debtor 2 only   | ☐ Unliquidated  |  |             |  |
|          | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                      | ☐ Disputed  Type of NONPRIORITY unsecured                                     | d claim:                                     |             |  |
|          | ☐ Check if this claim is for a community  | ☐ Student loans   |  |             |  |
|          | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims                    | ration agreement or divorce that you did not |             |  |
|          | ■ No  | ☐ Debts to pension or profit-sharin   |  |             |  |
| Yes      |   | Other. Specify Credit Card  |  |             |  |
| 4.1      | LendingClub   | Last 4 digits of account number   | 7489   | \$28,371.00 |  |
|          | Nonpriority Creditor's Name Attn: Bankruptcy 595 Market St, Ste 200 San Francisco, CA 94105 | When was the debt incurred?   | Opened 09/18 Last Active 10/11/19            |             |  |
|          | Number Street City State Zip Code Who incurred the debt? Check one.                         | As of the date you file, the claim i  | s: Check all that apply                      |             |  |
|          | ■ Debtor 1 only   | ☐ Contingent  |  |             |  |
|          | Debtor 2 only   | ☐ Unliquidated  |  |             |  |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |             |  |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured   |  |             |  |
|          | $\square$ Check if this claim is for a community debt                                       | <ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul> | ration agreement or divorce that you did not |             |  |
|          | Is the claim subject to offset?   | report as priority claims   |  |             |  |
|          | No  | Debts to pension or profit-sharin   | g plans, and other similar debts             |             |  |
|          | Yes   | Other. Specify Unsecured  |  |             |  |

| Debto<br>Debto | or 1 Kariim Edward Smith or 2 Laquisha Rena Smith                                       |   | Case number (if known)                       |            |
|----------------|---|---|--|------------|
| 4.1<br>4       | On Deck Capital, Inc.   | Last 4 digits of account number   | \$57,000.00                                  |            |
|                | Nonpriority Creditor's Name 1400 Broadway 25th Floor New York, NY 10018                 | When was the debt incurred?   |  |            |
|                | Number Street City State Zip Code Who incurred the debt? Check one.                     | As of the date you file, the claim i  | s: Check all that apply                      |            |
|                | Debtor 1 only   | ☐ Contingent  |  |            |
|                | Debtor 2 only   | ☐ Unliquidated  |  |            |
|                | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|                | At least one of the debtors and another   | Type of NONPRIORITY unsecured   | d claim:                                     |            |
|                | $\square$ Check if this claim is for a community debt                                   |   | ration agreement or divorce that you did not |            |
|                | Is the claim subject to offset?   | report as priority claims   |  |            |
|                | No  | Debts to pension or profit-sharin   |  |            |
|                | Yes   | Other. Specify Business L   | oan  |            |
| 4.1<br>5       | Syncb/PPC   | Last 4 digits of account number   | 7693   | \$1,508.00 |
|                | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896            | When was the debt incurred?   | Opened 11/15 Last Active 10/22/19            |            |
|                | Number Street City State Zip Code  Who incurred the debt? Check one.                    | As of the date you file, the claim i  |  |            |
|                | Debtor 1 only   | Пол   |  |            |
|                |   | ☐ Contingent  |  |            |
|                | ☐ Debtor 2 only   | ☐ Unliquidated  |  |            |
|                | Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecured                                   | 1 claim:                                     |            |
|                | At least one of the debtors and another   | Student loans   | i Claiiii.                                   |            |
|                | ☐ Check if this claim is for a community debt  Is the claim subject to offset?          |   | ration agreement or divorce that you did not |            |
|                | ■ No  | Debts to pension or profit-sharin   | g plans, and other similar debts             |            |
|                | Yes   | Other. Specify Credit Card  |  |            |
| 4.1<br>6       | Synchrony Bank/Care Credit  | Last 4 digits of account number   | 1059   | \$2,145.00 |
|                | Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060                         | When was the debt incurred?   | Opened 10/17 Last Active 11/12/19            |            |
|                | Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim i  | s: Check all that apply                      |            |
|                | Debtor 1 only   | ☐ Contingent  |  |            |
|                | Debtor 2 only   | ☐ Unliquidated  |  |            |
|                | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|                | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured   |  |            |
|                | ☐ Check if this claim is for a community  | ☐ Student loans   |  |            |
|                | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims                |  |            |
|                | No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts |  |            |
|                | Yes   | Other. Specify Charge Acc   | count  |            |

| Debt         | or 2 Laquisha Rena Smith   |   | Case number (if known)                           |                        |  |  |
|--------------|--|---|--|------------------------|--|--|
| 4.1<br>7     | Wells Fargo Bank NA  | Last 4 digits of account number   | 7480   | \$6,820.00             |  |  |
|              | Nonpriority Creditor's Name Attn: Bankruptcy 1 Home Campus Mac X2303-01a Des Moines, IA 50328  | When was the debt incurred?   | Opened 10/16 Last Active 10/17/19                |                        |  |  |
|              | Number Street City State Zip Code  Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |  |                        |  |  |
|              | Debtor 1 only  | Contingent  |  |                        |  |  |
|              | Debtor 2 only  | ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |  |                        |  |  |
|              | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another   |   |  |                        |  |  |
|              | ☐ Check if this claim is for a community debt  Is the claim subject to offset?   |   |  |                        |  |  |
|              | ■ No   | Debts to pension or profit-shari  | ng plans, and other similar debts                |                        |  |  |
|              | Yes  | Other. Specify Credit Care  | d  |                        |  |  |
| Part         | 3: List Others to Be Notified About a De   | ebt That You Already Listed   |  |                        |  |  |
| is tı<br>hav | this page only if you have others to be notified rying to collect from you for a debt you owe to se more than one creditor for any of the debts the fired for any debts in Parts 1 or 2, do not fill out | omeone else, list the original creditor i<br>at you listed in Parts 1 or 2, list the add  | Parts 1 or 2, then list the collection agency h  | ere. Similarly, if you |  |  |
|              | and Address  | On which entry in Part 1 or Part 2 did you  | ulist the original creditor?                     |                        |  |  |
|              | pal Credit   | Line <b>4.15</b> of ( <i>Check one</i> ):   | Part 1: Creditors with Priority Unsecured Claims | i .                    |  |  |
|              | Box 105658<br>nta, GA 30348-5658   |   | Part 2: Creditors with Nonpriority Unsecured Cla | aims                   |  |  |
|              |  | Lost 4 digits of account number   |  |                        |  |  |

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                   |     |  |     | Total Claim      |
|-------------------|-----|--|-----|------------------|
| otal              | 6a. | Domestic support obligations   | 6a. | \$<br>0.00       |
| aims<br>om Part 1 | 6b. | Taxes and certain other debts you owe the government   | 6b. | \$<br>23,000.00  |
|                   | 6c. | Claims for death or personal injury while you were intoxicated   | 6c. | \$<br>0.00       |
|                   | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                  | 6d. | \$<br>0.00       |
|                   | 6e. | Total Priority. Add lines 6a through 6d.   | 6e. | \$<br>23,000.00  |
|                   |     |  |     | Total Claim      |
| otal              | 6f. | Student loans  | 6f. | \$<br>62,126.00  |
| aims<br>om Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that  | 6g. | \$<br>0.00       |
|                   | 6h. | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$<br>0.00       |
|                   | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here.                               | 6i. | \$<br>133,009.00 |
|                   | 6j. | Total Nonpriority. Add lines 6f through 6i.  | 6j. | \$<br>195,135.00 |

# Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 37 of 62

| Fill in this infor     | mation to identify your  | case:             |            |                                      |
|------------------------|--------------------------|-------------------|------------|--------------------------------------|
| Debtor 1               | Kariim Edward S          | mith              |            |                                      |
|                        | First Name               | Middle Name       | Last Name  |                                      |
| Debtor 2               | Laquisha Rena S          | mith              |            |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name  |                                      |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA |                                      |
| Case number (if known) |                          |                   |            | ☐ Check if this is an amended filing |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Р   | Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for   |
|-----|---|---|
| 2.1 | Better Choice Real Estate<br>1095 Old Roswell Road<br>Suite C1<br>Roswell, GA 30076                       | Residential lease. The debtors are the tenants and Better Choice Real Estate is the landlord. The debtors pay \$3,350.00 per month to Better Choice Real Estate for rent.                       |
| 2.2 | OJC Properties, Inc.<br>215 Piedmont Avenue<br>Unit 1004<br>Atlanta, GA 30308                             | Business Commercial lease. The debtors and the debtors' business lease a commercial space/location for their business. Debtors pay \$2,300.00 per month to OJC Properties for a business lease. |

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 38 of 62

|             |  | Document  | Page 38 of 62   |  |
|-------------|--|---|---|--|
| Fill in th  | is information to identify your  | case:   |   |  |
| Debtor 1    | Kariim Edward Sr   | nith  |   |  |
| 20210       | First Name   | Middle Name   | Last Name   |  |
| Debtor 2    | Laquisha Rena Sı   |   |   |  |
| (Spouse if, | iling) First Name  | Middle Name   | Last Name   |  |
| United S    | tates Bankruptcy Court for the:  | NORTHERN DISTRICT OF  | GEORGIA   |  |
| Case nui    | mber   |   |   |  |
| (if known)  |  |   |   | ☐ Check if this is an  |
|             |  |   |   | amended filing   |
| Officia     | al Form 106H   |   |   |  |
|             |  | alatawa   |   |  |
| <u>Scne</u> | dule H: Your Code  | eptors  |   | 12/15  |
| 1. Do       | the and case number (if known).  To you have any codebtors? (If your codebtors).  The sestion of the last 8 years, have you cona, California, Idaho, Louisiana, co. Go to line 3.  The sestion of the ses | Answer every question.  you are filing a joint case, do recommend in a community property Nevada, New Mexico, Puertouse, or legal equivalent live without property ors. Do not include your spif that person is a guarantor | ouse as a codebtor if your spouse is fi<br>or cosigner. Make sure you have listed<br>G (Official Form 106G). Use Schedule | erty states and territories include<br>n.)<br>ling with you. List the person shown<br>d the creditor on Schedule D (Official<br>D, Schedule E/F, or Schedule G to fill |
|             | Column 1: Your codebtor Name, Number, Street, City, State and ZII  | P Code  | Column 2: <b>The</b><br>Check all sched   | creditor to whom you owe the debt lules that apply:  |
| 3.1         | Body by Kariim, LLC<br>1331 Marietta Blvd., NW<br>Suite A<br>Atlanta, GA 30318<br>Debtors' business.   |   | ☐ Schedule ☐ Schedule ☐ Schedule ☐ On Deck Cap  | /F, line <b>4.14</b>   |
| 3.2         | Body by Kariim, LLC<br>1331 Marietta Blvd., NW<br>Suite A<br>Atlanta, GA 30318<br>Debtors' business.   |   | ■ Schedule D □ Schedule E □ Schedule G Mercedes-Be  | /F, line   |

Schedule H: Your Codebtors

| Fill in this informat           | tion to identify your case:                          |  |
|---------------------------------|--|--|
| Debtor 1                        | Kariim Edward Smith                                  |  |
| Debtor 2<br>(Spouse, if filing) | Laquisha Rena Smith                                  |  |
| United States Ban               | skruptcy Court for the: NORTHERN DISTRICT OF GEORGIA |  |
| Case number (If known)          |  | Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter |
| Official Fo                     | <del></del>  | 13 income as of the following date:  MM / DD/ YYYY                                 |
| Schedule                        | I: Your Income                                       | 12/15  |

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Describe Employment** Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Self-Employed Self-Employed Include part-time, seasonal, or **Employer's name** Body by Kariim, LLC Body by Kariim, LLC self-employed work. **Employer's address** Occupation may include student 1331 Marietta Blvd., NW 1331 Marietta Blvd., NW or homemaker, if it applies. Suite A Suite A Atlanta, GA 30318 Atlanta, GA 30318 How long employed there? 10 years 10 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.
 Calculate gross Income. Add line 2 + line 3.

|    |     | For Debtor 1 |     | ebtor 2 or<br>iling spouse |
|----|-----|--------------|-----|----------------------------|
| 2. | \$  | 0.00         | \$  | 0.00                       |
| 3. | +\$ | 0.00         | +\$ | 0.00                       |
| 4. | \$  | 0.00         | \$_ | 0.00                       |

Official Form 106I Schedule I: Your Income page 1

|     | tor 1<br>tor 2    | Kariim Edward Smith<br>Laquisha Rena Smith  | _                 | Ca   | ise number ( <i>if kr</i> | nown)  |          |                               |        |
|-----|-------------------|---|-------------------|------|---------------------------|--|----------|-------------------------------|--------|
|     |                   |   |                   | F    | or Debtor 1               |  |          | Debtor 2 or<br>-filing spouse |        |
|     | Сор               | y line 4 here   | 4.                | \$   |                           | 0.00   | \$       | 0.00                          |        |
| 5.  | List              | all payroll deductions:   |                   |      |                           |  |          |                               |        |
|     | 5a.               | Tax, Medicare, and Social Security deductions   | 5a.               | \$   |                           | 0.00   | \$       | 0.00                          |        |
|     | 5b.               | Mandatory contributions for retirement plans  | 5b.               |      | -                         | 0.00   | \$       | 0.00                          |        |
|     | 5c.               | Voluntary contributions for retirement plans  | 5c.               | \$   |                           | 0.00   | \$       | 0.00                          |        |
|     | 5d.               | Required repayments of retirement fund loans  | 5d.               | \$   |                           | 0.00   | \$       | 0.00                          |        |
|     | 5e.               | Insurance   | 5e.               | \$   | <u> </u>                  | 0.00   | \$       | 0.00                          |        |
|     | 5f.               | Domestic support obligations  | 5f.               | \$   |                           | 0.00   | \$       | 0.00                          |        |
|     | 5g.               | Union dues  | 5g.               |      |                           | 0.00   | \$       | 0.00                          |        |
|     | 5h.               | Other deductions. Specify:  | 5h.               | + \$ | S                         | 0.00   | + \$     | 0.00                          |        |
| 6.  | Add               | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.                | \$   |                           | 0.00   | \$       | 0.00                          |        |
| 7.  | Cald              | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.                | \$   |                           | 0.00   | \$       | 0.00                          |        |
| 8.  | List<br>8a.       | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total       |                   |      |                           |  |          |                               |        |
|     |                   | monthly net income.   | 8a.               |      | ,,,,,,,,                  | 5.29   | \$       | 0.00                          |        |
|     | 8b.               | Interest and dividends  | 8b.               | \$   | 5                         | 0.00   | \$       | 0.00                          |        |
|     | 8c.<br>8d.<br>8e. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation Social Security                   | 8c.<br>8d.<br>8e. | \$   | 5                         | 0.00<br>0.00<br>0.00                         | \$<br>\$ | 0.00<br>0.00<br>0.00          |        |
|     | 8f.               | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.   | Э                 | Ψ    |                           | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | Ψ        | 0.00                          |        |
|     | _                 | Specify:  | 8f.               | \$   |                           | 0.00   | \$       | 0.00                          |        |
|     | 8g.               | Pension or retirement income  | 8g.<br>8h.        |      |                           | 0.00   | \$       | 0.00                          |        |
|     | 8h.               | Other monthly income. Specify:  | 011.              | + \$ |                           | 0.00   |          | 0.00                          |        |
| 9.  | Add               | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.                | \$_  | 19,035                    | 5.29   | \$       | 0.00                          |        |
| 10  | Calc              | culate monthly income. Add line 7 + line 9.   | 10.               | \$   | 19,035.29                 | + \$   |          | 0.00 = \$ 19,                 | 035.29 |
| 10. |                   | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.               |      | 13,033.23                 | ·   •  |          | <u> </u>                      | 033.23 |
| 11. | Stat<br>Inclu     | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not | depe              |      | . ,                       |  |          | Schedule J.<br>11. +\$        | 0.00   |
| 12. |                   | I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certalies   |                   |      |                           |  |          | 12. \$ <b>19,</b>             | 035.29 |
| 13. | Do y              | you expect an increase or decrease within the year after you file this form<br>No.  | 1?                |      |                           |  |          | Combined<br>monthly in        |        |
|     |                   | Yes. Explain: Debtors expect a significant decrease in busines  | ss inc            | om   | e due to the              | e los  | s of m   | anv clients.                  |        |
|     |                   |   |                   |      |                           |  |          | ,                             |        |

Official Form 106l Schedule I: Your Income page 2

| Eill      | in this informa                                    | tion to identify yo                                   | vur occo:                           |   |  | 1                      |                |                                       |  |
|-----------|--|---|-------------------------------------|---|--|------------------------|----------------|---------------------------------------|--|
|           | III IIIIS IIIIOIIIIa                               | don to identify yo                                    | our case.                           |   |  |                        |                |                                       |  |
| Deb       | otor 1   | Kariim Edwa   | rd Smith                            | 1   |  | _                      |                | f this is:<br>amended filing          |  |
|           | otor 2<br>ouse, if filing)                         | Laquisha Re   | na Smith                            | 1   |  |                        | Α:             | supplement show                       | wing postpetition chapter the following date:    |
| Unit      | ted States Bankr                                   | ruptcy Court for the                                  | : NORTH                             | ERN DISTRICT OF GEOR  | RGIA   |                        | M              | M / DD / YYYY                         |  |
| 1         | e number<br>nown)                                  |   |                                     |   |  |                        |                |                                       |  |
| Of        | fficial Fo   | rm 106J   |                                     |   |  |                        |                |                                       |  |
| So        | chedule  | J: Your l   | Exper                               | ises  |  |                        |                |                                       | 12/1   |
| Be        | as complete ormation. If mathematic moder (if know | and accurate as<br>ore space is ne<br>n). Answer ever | possible<br>eded, atta<br>y questio | . If two married people ar  | e filing together, be<br>form. On the top of | oth are ed<br>any addi | ually<br>tiona | y responsible fo<br>al pages, write y | or supplying correct<br>your name and case       |
| Par<br>1. | t 1: Descr<br>Is this a joir                       | ibe Your House  | hold                                |   |  |                        |                |                                       |  |
|           | □ No. Go to  |   |                                     |   |  |                        |                |                                       |  |
|           |  | s Debtor 2 live i                                     | n a separ                           | ate household?  |  |                        |                |                                       |  |
|           | ■ N<br>□ Y   |   | st file Offici                      | al Form 106J-2, <i>Expense</i> s  | for Separate House                           | ehold of De            | ebtor          | 2.                                    |  |
| 2.        | Do vou have  | e dependents?   | □ No                                |   |  |                        |                |                                       |  |
|           | Do not list D<br>Debtor 2.                         | -   | Yes.                                | Fill out this information for each dependent                              | Dependent's relati                           |                        |                | Dependent's age                       | Does dependent live with you?                    |
|           | Do not state dependents                            |   |                                     |   | Daughter                                     |                        | _              | 3                                     | □ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No |
| 3.        | expenses o<br>yourself and                         | penses include<br>f people other to<br>d your depende | han<br>nts? □                       | No<br>Yes   |  |                        |                |                                       | ☐ Yes  |
| exp       | imate your ex                                      |   | our bankr                           | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp |  |                        |                |                                       |  |
| the       |  | h assistance and                                      |                                     | government assistance i<br>luded it on <i>Schedule I:</i> )               |  |                        |                | Your exp                              | enses  |
| 4.        |  | or home owners  |                                     | ses for your residence. In  | nclude first mortgage                        | e<br>4.                | \$_            |                                       | 3,350.00   |
|           | If not includ                                      | led in line 4:  |                                     |   |  |                        |                |                                       |  |
|           | 4a. Real e   | estate taxes  |                                     |   |  | 4a.                    | \$             |                                       | 0.00   |
|           | •  | rty, homeowner's                                      |                                     |   |  | 4b.                    | _              |                                       | 100.00   |
|           |  |   |                                     | upkeep expenses   |  | 4c.                    | - : -          |                                       | 0.00   |
| 5.        |  | owner's associat<br>nortgage payme                    |                                     | oominium dues<br>our residence, such as ho                                | me equity loans                              | 4d.<br>5.              |                |                                       | 0.00<br>0.00                                     |

|     | btor 1 Kariim Edward Smith btor 2 Laquisha Rena Smith   | Ca                                   | ase num    | ber (if known) |                            |
|-----|---|--------------------------------------|------------|----------------|----------------------------|
| 6.  | Utilities:  |                                      |            |                |                            |
| 0.  | 6a. Electricity, heat, natural gas  |                                      | 6a.        | \$             | 260.00                     |
|     | 6b. Water, sewer, garbage collection  |                                      | 6b.        | \$             | 50.00                      |
|     | 6c. Telephone, cell phone, Internet, satellite, an  | d cable services                     | 6c.        | \$             | 277.85                     |
|     | 6d. Other. Specify:   |                                      | 6d.        | \$             | 0.00                       |
| 7.  | Food and housekeeping supplies  |                                      | _<br>7.    | \$             | 750.00                     |
| 8.  | Childcare and children's education costs  |                                      | 8.         | \$             | 1,056.00                   |
| 9.  | Clothing, laundry, and dry cleaning   |                                      | 9.         | \$             | 50.00                      |
| 10. | Personal care products and services   |                                      | 10.        | \$             | 450.00                     |
| 11. | Medical and dental expenses   |                                      | 11.        | \$             | 0.00                       |
| 12. | Transportation. Include gas, maintenance, bus or  | train fare.                          | 10         | ¢              | 120.00                     |
| 10  | Do not include car payments.  | magazinas and baaks                  | 12.<br>13. | ·              |                            |
|     | <ul> <li>Entertainment, clubs, recreation, newspapers,</li> <li>Charitable contributions and religious donation</li> </ul>  |                                      | 13.<br>14. | ·              | 0.00                       |
|     | Insurance.  | 15                                   | 14.        | Φ              | 0.00                       |
| 15. | Do not include insurance deducted from your pay   | or included in lines 4 or 20.        |            |                |                            |
|     | 15a. Life insurance   |                                      | 15a.       | \$             | 137.00                     |
|     | 15b. Health insurance   |                                      | 15b.       | \$             | 0.00                       |
|     | 15c. Vehicle insurance  |                                      | 15c.       | \$             | 139.00                     |
|     | 15d. Other insurance. Specify:  |                                      | 15d.       | \$             | 0.00                       |
| 16. | Taxes. Do not include taxes deducted from your page 1   | ay or included in lines 4 or 20.     | _          |                |                            |
|     | Specify: Payments to IRS for back taxes   |                                      | _ 16.      | \$             | 740.00                     |
|     | Specify: Payments to GA Dept. of Reveue   | for back taxes                       | _          | \$             | 450.00                     |
| 17. | Installment or lease payments:  |                                      |            | _              | _                          |
|     | 17a. Car payments for Vehicle 1   |                                      | 17a.       | ·              | 2,153.00                   |
|     | 17b. Car payments for Vehicle 2   |                                      | 17b.       | · <del></del>  | 399.00                     |
|     | 17c. Other. Specify:  |                                      | 17c.       |                | 0.00                       |
| 4.0 | 17d. Other. Specify:  |                                      | _ 17d.     | \$             | 0.00                       |
| 18. | Your payments of alimony, maintenance, and s deducted from your pay on line 5, Schedule I, )  |                                      | 18.        | \$             | 0.00                       |
| 19. | Other payments you make to support others w   |                                      |            | \$             | 0.00                       |
|     | Specify:  | ,                                    | 19.        |                | 0.00                       |
| 20. | Other real property expenses not included in li   | nes 4 or 5 of this form or on Schedu | ile I: Yo  | our Income.    |                            |
|     | 20a. Mortgages on other property  |                                      | 20a.       | \$             | 0.00                       |
|     | 20b. Real estate taxes  |                                      | 20b.       | \$             | 0.00                       |
|     | 20c. Property, homeowner's, or renter's insurance   | e                                    | 20c.       | \$             | 0.00                       |
|     | 20d. Maintenance, repair, and upkeep expenses   |                                      | 20d.       | \$             | 0.00                       |
|     | 20e. Homeowner's association or condominium of  | lues                                 | 20e.       | \$             | 0.00                       |
| 21. | Other: Specify: Regular Business Expens   | es                                   | 21.        | +\$            | 6,670.87                   |
|     | Other Business Expenses   |                                      | _          | +\$            | 3,438.36                   |
| 22  | Calculate your monthly expenses   |                                      |            |                |                            |
|     | 22a. Add lines 4 through 21.  |                                      |            | \$             | 20,591.08                  |
|     | 22b. Copy line 22 (monthly expenses for Debtor 2)   | if any, from Official Form 106.J-2   |            | \$             | 20,001.00                  |
|     | 22c. Add line 22a and 22b. The result is your mon   |                                      |            | \$             | 20 504 08                  |
|     | 220. Add line 22d and 22b. The result is your mon   | ину схроносо.                        |            | Ψ              | 20,591.08                  |
| 23. | Calculate your monthly net income.  |                                      |            |                |                            |
|     | 23a. Copy line 12 (your combined monthly incom  |                                      | 23a.       | · <del></del>  | 19,035.29                  |
|     | 23b. Copy your monthly expenses from line 22c a   | above.                               | 23b.       | -\$            | 20,591.08                  |
|     |   | 41.                                  |            |                |                            |
|     | 23c. Subtract your monthly expenses from your n<br>The result is your monthly net income.   | nonthly income.                      | 23c.       | \$             | -1,555.79                  |
|     | The result is your monthly net income.  |                                      | _50.       | <u> </u>       | , -                        |
| 24. | <ul> <li>Do you expect an increase or decrease in your</li> <li>For example, do you expect to finish paying for your car lo modification to the terms of your mortgage?</li> <li>No.</li> </ul> |                                      |            |                | e or decrease because of a |
|     | T Ves Explain here:   |                                      |            |                |                            |

# Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 43 of 62

| Fill in this infor     | mation to identify your  | case:             |            |                                      |
|------------------------|--------------------------|-------------------|------------|--------------------------------------|
| Debtor 1               | Kariim Edward S          | mith  Middle Name | Last Name  |                                      |
| Debtor 2               | Laquisha Rena S          |                   | Lust Hamo  |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name  |                                      |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA |                                      |
| Case number (if known) |                          |                   |            | ☐ Check if this is an amended filing |

### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral  | What do you intend to do with the property that secures a debt?                                      | Did you claim the property as exempt on Schedule C? |
|--|--|---|
|  |  |   |
| Creditor's Affirm Inc  | ☐ Surrender the property.  | ■ No  |
| name:  | ☐ Retain the property and redeem it.   | _   |
| Description of Used furniture from Affirm, Inc.  | Retain the property and enter into a<br>Reaffirmation Agreement.                                     | ☐ Yes   |
| property Location: 2544 Sibley Drive, NE, Atlanta GA 30324   | ☐ Retain the property and [explain]:   |   |
| Creditor's Mercedes-Benz Financial Services  | ☐ Surrender the property. ☐ Retain the property and redeem it.                                       | ■ No  |
| Description of property securing debt:  2015 Mercedes G-550 28,000 miles Value based on Kelley Blue Book. Location: 2544 Sibley Drive, NE, | ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes   |
| Atlanta GA 30324   |  |   |
| Creditor's Volkswagen Credit, Inc name:  | ☐ Surrender the property. ☐ Retain the property and redeem it.                                       | ■ No  |
|  | Retain the property and enter into a   | ☐ Yes   |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

|     | btor 1<br>btor 2                 |           |                     | vard Smith<br>Rena Smith  |               |                 |       | Case number (if know  | vn)    |                                  |
|-----|----------------------------------|-----------|---------------------|---|---------------|-----------------|-------|---|--------|----------------------------------|
| ŗ   | Descript<br>property<br>securing |           | Valu<br>Boo<br>Loca | a Audi A3 20,000 mile<br>e based on Kelley Bl<br>k.<br>ation: 2544 Sibley Dri<br>nta GA 30324 | ue            | Reaffirmati     |       | greement.<br>erty and [explain]:                                |        |                                  |
|     | _                                |           |                     | expired Personal Proper<br>onal property lease that   |               | n Schedule G: I | Exec  | utory Contracts and Unexp                                       | ired L | eases (Official Form 106G), fill |
|     |                                  |           |                     |   |               | •               |       | eases that are still in effect;<br>assume it. 11 U.S.C. § 365(p |        | ase period has not yet ended.    |
| De  | scribe y                         | your un   | expire              | ed personal property lea  | ises          |                 |       |   | W      | ill the lease be assumed?        |
|     | ssor's na                        |           |                     | Better Choice Real E  |               |                 |       |   |        | No                               |
|     |                                  |           |                     |   |               |                 |       |   | -      | Yes                              |
|     | scriptior<br>perty:              | n of leas |                     | Residential lease. The<br>Estate is the landlord<br>Choice Real Estate fo                     | I. The debto  |                 |       | nd Better Choice Real<br>per month to Better                    |        |                                  |
| Les | ssor's na                        | ame:      |                     | OJC Properties, Inc.  |               |                 |       |   |        | No                               |
|     |                                  |           |                     |   |               |                 |       |   |        | Yes                              |
|     | scriptior<br>perty:              | n of leas |                     |   | ocation for   | their busines   | ss. [ | e debtors' business lease<br>Debtors pay \$2,300.00 pe          |        |                                  |
| Par | rt 3:                            | Sign Be   | low                 |   |               |                 |       |   |        |                                  |
|     |                                  |           |                     | y, I declare that I have ir<br>to an unexpired lease.   | ndicated my i | intention about | any   | property of my estate that                                      | secur  | es a debt and any personal       |
| Х   | /s/ K                            | ariim E   | Edwa                | rd Smith  |               | X               | /s/ I | Laquisha Rena Smith   |        |                                  |
|     | Karii                            | im Edv    | vard \$             | Smith   |               |                 |       | uisha Rena Smith  |        |                                  |
|     | Signa                            | ature of  | Debto               | · 1   |               |                 | Sign  | nature of Debtor 2  |        |                                  |
|     | Date                             | De        | ceml                | per 20, 2019  |               | Dat             | e     | December 20, 2019   |        |                                  |
|     |                                  |           |                     |   |               |                 |       |   |        |                                  |

# Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 45 of 62

| Fill in this infor     | mation to identify your  | case:             |            |                                      |
|------------------------|--------------------------|-------------------|------------|--------------------------------------|
| Debtor 1               | Kariim Edward Sı         | mith              |            |                                      |
|                        | First Name               | Middle Name       | Last Name  |                                      |
| Debtor 2               | Laquisha Rena S          | mith              |            |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name  |                                      |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA |                                      |
| Case number (if known) |                          |                   |            | ☐ Check if this is an amended filing |

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t 1: Summarize Your Assets  |             |                          |
|-----|---|-------------|--------------------------|
|     |   | Your a      | ssets<br>of what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$          | 0.00                     |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$          | 92,393.00                |
|     | 1c. Copy line 63, Total of all property on Schedule A/B   | \$          | 92,393.00                |
| Par | t 2: Summarize Your Liabilities   |             |                          |
|     |   |             | abilities<br>at you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D                  | \$          | 128,644.00               |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$          | 23,000.00                |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$          | 195,135.00               |
|     | Your total liabilities  | \$          | 346,779.00               |
| Par | t 3: Summarize Your Income and Expenses   |             |                          |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$          | 19,035.29                |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$          | 20,591.08                |
| Par | t 4: Answer These Questions for Administrative and Statistical Records  |             |                          |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                                      | ır other sc | hedules.                 |
| 7.  | ■ Yes What kind of debt do you have?  |             |                          |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal  | , family, or             |
|     | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this  | box and s   | ubmit this form to       |

the court with your other schedules.

| Dept | or Z | Laquisha Rena Smith   | Case number (if known)                   |    |
|------|------|---|--|----|
|      |      | n the Statement of Your Current Monthly Income: Copy your total of A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | urrent monthly income from Official Form | \$ |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Tot | al claim  |
|--|-----|-----------|
| From Part 4 on Schedule E/F, copy the following:   |     |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$_ | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_ | 23,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$  | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$  | 62,126.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$ | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$  | 85,126.00 |

| Fill in this            | information to identify your case:   |   |                                |
|-------------------------|--|---|--------------------------------|
| Debtor 1                | Kariim Edward Smith  |   |                                |
|                         | First Name Middle Name   | Last Name   |                                |
| Debtor 2                | Laquisha Rena Smith  |   |                                |
| (Spouse if, fili        | ng) First Name Middle Name   | e Last Name   |                                |
| United Sta              | ates Bankruptcy Court for the: NORTHERN D  | ISTRICT OF GEORGIA  |                                |
| Case num                | her  |   |                                |
| (if known)              |  |   | ☐ Check if this is an          |
|                         |  |   | amended filing                 |
| You must to             | file this form whenever you file bankruptcy so   | lly responsible for supplying correct information. chedules or amended schedules. Making a false statement that a bankruptcy case can result in fines up to \$250,000, or |                                |
|                         | Sign Below   |   |                                |
| Did y                   | ou pay or agree to pay someone who is NOT  | an attorney to help you fill out bankruptcy forms?  |                                |
|                         | No   |   |                                |
|                         | Yes. Name of person  | Attach Bankruptc  | cy Petition Preparer's Notice, |
| <del>_</del>            | •  | Declaration, and  | Signature (Official Form 119)  |
| that that that the X /s | r penalty of perjury, I declare that I have read<br>hey are true and correct.<br>s/ Kariim Edward Smith<br>Cariim Edward Smith<br>ignature of Debtor 1 | the summary and schedules filed with this declaration and  X /s/ Laquisha Rena Smith Laquisha Rena Smith Signature of Debtor 2  | d                              |
| D                       | December 20, 2019  | Date <b>December 20, 2019</b>   |                                |
|                         |  |   |                                |

Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 48 of 62

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court** Northern District of Georgia

| In re       | Kariim Edward Smith<br>Laquisha Rena Smith   | Case N  | 0.   |                 |
|-------------|--|---|--|-----------------|
|             | Debtor(s)  | Chapte  | <b>7</b>   |                 |
|             | DISCLOSURE OF COMPENSATION OF A  | TTORNEY FOR 1   | DEBTOR(S)  |                 |
| (           | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in bank be rendered on behalf of the debtor(s) in contemplation of or in connection with  | kruptcy, or agreed to be pa   | aid to me, for services r                            |                 |
|             | For legal services, I have agreed to accept  | \$  | 1,105.00   |                 |
|             | Prior to the filing of this statement I have received  |   | 1,105.00   |                 |
|             | Balance Due  |   | 0.00   |                 |
| 2.          | \$335.00 of the filing fee has been paid.  |   |  |                 |
| 3.          | The source of the compensation paid to me was:   |   |  |                 |
|             | ■ Debtor □ Other (specify):  |   |  |                 |
| 4. ′        | The source of compensation to be paid to me is:  |   |  |                 |
|             | ■ Debtor □ Other (specify):  |   |  |                 |
| 5.          | ■ I have not agreed to share the above-disclosed compensation with any other   | person unless they are m  | embers and associates of                             | of my law firm. |
|             | ☐ I have agreed to share the above-disclosed compensation with a person or property of the agreement, together with a list of the names of the people sharing  |   |  | law firm. A     |
| 6.          | In return for the above-disclosed fee, I have agreed to render legal service for al  | ll aspects of the bankrupto   | y case, including:                                   |                 |
| 1           | a. Analysis of the debtor's financial situation, and rendering advice to the debtor by Preparation and filing of any petition, schedules, statement of affairs and place. Representation of the debtor at the meeting of creditors and confirmation head. [Other provisions as needed]  Initial meeting and intake  Helping client obtain pre-filing credit counseling and file created Review with Client Chapter 7 Petition before filing petition Change(s) of Address  Motion to Extend Stay  Motion to Impose Stay  Attend and represent client(s) at 341 Hearing | n which may be required;<br>aring, and any adjourned l  | nearings thereof;                                    | kruptcy;        |
| <b>7.</b> 1 | By agreement with the debtor(s), the above-disclosed fee does not include the form Application to Employ Professional  | \$300.0<br>\$250.00 per<br>\$300.00 ea<br>at request)-\$300.00 ea<br>\$250.0<br>\$300.0<br>\$300.0<br>\$300.0<br>\$300.0<br>\$300.0 | hr.<br>ch<br>ch<br>0<br>0<br>00<br>00<br>0<br>0<br>0 |                 |

Investigations by U.S. Trustee-----\$250.00 per hr.

Any and all non-bankruptcy related actions that are not already excluded above.

Any and all filing fees as required by the courts

| In re | Kariim Edward Smith<br>Laquisha Rena Smith | Case No. |  |
|-------|--|----------|--|
|       | Debtor(s)                                  |          |  |

### **DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

(Continuation Sheet)

|   | CERTIFICATION   |
|---|---|
| I certify that the foregoing is a complete stat this bankruptcy proceeding. | ement of any agreement or arrangement for payment to me for representation of the debtor(s) |
| December 20, 2019   | /s/ Howard Kent   |
| Date  | Howard Kent 415150  |
|   | Signature of Attorney   |
|   | THE KENT LAW FIRM   |
|   | 3355 Lenox Road   |
|   | Suite 600   |
|   | Atlanta, GA 30326   |
|   | 404-504-7090 Fax: 404-504-7094  |
|   | hkent@thekentlawfirm.com  |
|   | Name of law firm  |

## **United States Bankruptcy Court** Northern District of Georgia

| vard Smith<br>Rena Smith                         |   | Case No. |                     |
|--|---|----------|---------------------|
|  | Debtor(s)                               | Chapter  | 7                   |
| VERIFICATI  ebtors hereby verify that the attach | ON OF CREDITOR                          |          | of their knowledge. |
|  | /s/ Kariim Edward Smith                 |          |                     |
|  | Signature of Debtor                     |          |                     |
|  | /s/ Laquisha Rena Smith                 |          |                     |
| 20, 2019   | Kariim Edward Smith Signature of Debtor |          | _                   |

Signature of Debtor

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |  |
|------------|--------------------|--|
| \$245      | filing fee         |  |
| \$75       | administrative fee |  |
| + \$15     | trustee surcharge  |  |
| \$335      | total fee          |  |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

| Fill in t           | his information to identify your case:   | Ch   | eck one box only as d                                | irected in this form and                               | in Form                           |
|---------------------|--|--|--|--|-----------------------------------|
| Debtor              | 1 Kariim Edward Smith  | 122  | 2A-1Supp:  |  |                                   |
| Debtor<br>(Spouse   |  |  | ■ 1. There is no presi                               | umption of abuse                                       |                                   |
| United              | States Bankruptcy Court for the: Northern District of  | Georgia  | applies will be m                                    | o determine if a presur<br>nade under <i>Chapter 7</i> |                                   |
|                     | number   |  |  | cial Form 122A-2).                                     |                                   |
| (if known           | )  |  |  | does not apply now be service but it could ap          |                                   |
|                     |  |  | ☐ Check if this is a                                 | n amended filing                                       |                                   |
| Offic               | cial Form 122A - 1   |  |  |  |                                   |
| Cha                 | pter 7 Statement of Your Cur   | rent Monthly Inc   | ome  |  | 12/19                             |
| attach a<br>case nu | omplete and accurate as possible. If two married people an separate sheet to this form. Include the line number to will mber (if known). If you believe that you are exempted from a military service, complete and file Statement of Exempted Calculate Your Current Monthly Income | hich the additional information a<br>n a presumption of abuse becau            | applies. On the top of ar<br>se you do not have prin | ny additional pages, writ<br>narily consumer debts o   | te your name and<br>or because of |
| 1. <b>V</b>         | /hat is your marital and filing status? Check one onl  | ly.  |  |  |                                   |
|                     | Not married. Fill out Column A, lines 2-11.  |  |  |  |                                   |
|                     | I Married and your spouse is filing with you. Fill ou  | t both Columns A and B, lines  | 2-11.  |  |                                   |
|                     | I Married and your spouse is NOT filing with you. \  | ou and your spouse are:  |  |  |                                   |
|                     | ☐ Living in the same household and are not legal   | Ily separated. Fill out both Co  | lumns A and B, lines 2                               | 2-11.  |                                   |
|                     | ☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading   | gally separated under nonban   | kruptcy law that applie                              | es or that you and your                                |                                   |
| 101(<br>the 6       | n the average monthly income that you received from all s<br>10A). For example, if you are filing on September 15, the 6-months, add the income for all 6 months and divide the total less own the same rental property, put the income from that property.                          | onth period would be March 1 throu<br>by 6. Fill in the result. Do not include | ugh August 31. If the amode any income amount me     | ount of your monthly incon<br>ore than once. For examp | ne varied during<br>ble, if both  |
|                     |  |  | Column A Debtor 1                                    | Column B Debtor 2 or non-filing spouse                 |                                   |
|                     | our gross wages, salary, tips, bonuses, overtime, a ayroll deductions).  | and commissions (before all  | \$   | \$   |                                   |
|                     | <b>limony and maintenance payments.</b> Do not include olumn B is filled in.   | payments from a spouse if  | \$   | \$   |                                   |
| <b>o</b><br>fr<br>a | Il amounts from any source which are regularly pa f you or your dependents, including child support. om an unmarried partner, members of your household not roommates. Include regular contributions from a spoled in. Do not include payments you listed on line 3.                 | Include regular contributions, your dependents, parents,                       | \$   | \$   |                                   |
| 5. <b>N</b>         | et income from operating a business, profession, o   |  |  |  |                                   |
|                     |  | Debtor 1   |  |  |                                   |
|                     | ross receipts (before all deductions)  | \$   |  |  |                                   |
|                     | rdinary and necessary operating expenses   | ·  | \$   | \$   |                                   |
|                     | et monthly income from a business, profession, or farn<br>et income from rental and other real property  | n \$ copy nere ->  | Ψ  | Ψ  |                                   |
| 6. <b>N</b>         | et income from rental and other real property  | Debtor 1   |  |  |                                   |
| G                   | ross receipts (before all deductions)  | \$   |  |  |                                   |
|                     | ordinary and necessary operating expenses  | <b>-</b> \$  |  |  |                                   |
| į .                 | et monthly income from rental or other real property   | \$ Copy here ->  | \$   | \$   |                                   |
| 7. lr               | iterest, dividends, and royalties  |  | \$   | \$   |                                   |

Official Form 122A-1

# Case 19-70334-sms Doc 1 Filed 12/20/19 Entered 12/20/19 15:02:14 Desc Main Document Page 56 of 62

Debtor 1 Laquisha Rena Smith Debtor 2 Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total current monthly income. Add lines 2 through 10 for \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> Multiply by 12 (the number of months in a year) **x** 12 12b. The result is your annual income for this part of the form 12h 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Kariim Edward Smith X /s/ Laquisha Rena Smith Kariim Edward Smith Laquisha Rena Smith Signature of Debtor 1 Signature of Debtor 2 Date December 20, 2019 Date December 20, 2019

Official Form 122A-1

**Kariim Edward Smith** 

| Debtor 1<br>Debtor 2 | Kariim Edward Smith Laquisha Rena Smith                                   | Case number (if known) |  |  |
|----------------------|---|------------------------|--|--|
|                      | MM / DD / YYYY  | MM/DD/YYYY             |  |  |
|                      | If you checked line 14a, do NOT fill out or file Form 122A-2.             |                        |  |  |
|                      | If you checked line 14b, fill out Form 122A-2 and file it with this form. |                        |  |  |

| Fill in                   | n this inf   | orma                     | ation to identify your case:   |  |  |  |
|---------------------------|--|--------------------------|--|--|--|--|
| Debt                      | or 1   | K o                      | riim Edward Smith  |  |  |  |
| Debli                     | OI I   | Na                       | IIIIII Edward Siliidi  |  |  |  |
| Debte<br>(Spo             | or 2<br>use, if filir  |                          | quisha Rena Smith  |  |  |  |
| Unite                     | ed States  | Bank                     | ruptcy Court for the: Northern District of Georgia   |  |  |  |
| Case<br>(if kn            | e number<br>own)   |                          |  | ☐ Check if this is an amended filing   |  |  |
|                           |  |                          | m 122A - 1Supp   |  |  |  |
| File the<br>exem<br>exclu | his suppl<br>pted fron   | emer<br>n a pi<br>this s | of Exemption from Presumption of A nt together with Chapter 7 Statement of Your Current Monthly In resumption of abuse. Be as complete and accurate as possible. statement applies to only one of you, the other person should co C. § 707(b)(2)(C). | come (Official Form 122A-1), if you believe that you are If two married people are filing together, and any of the   |  |  |
| Part                      | 1 ld   | entify                   | the Kind of Debts You Have   |  |  |  |
|                           | personal   | famil                    | ts primarily consumer debts? Consumer debts are defined in 11 U. ly, or household purpose." Make sure that your answer is consistent ing for Bankruptcy (Official Form 1).   |  |  |  |
|                           |  |                          | Form 122A-1; on the top of page 1 of that form, check box 1, <i>There</i> ement with the signed Form 122A-1.   | is no presumption of abuse, and sign Part 3. Then submit this  |  |  |
|                           | ☐ Yes.   |                          | · ·  |  |  |  |
|                           |  |                          |  |  |  |  |
| Part                      | 2: Do  | eterm                    | nine Whether Military Service Provisions Apply to You  |  |  |  |
| 2.                        | Are you  | a dis                    | abled veteran (as defined in 38 U.S.C. § 3741(1))?   |  |  |  |
|                           | □ No. Go to line 3.  |                          |  |  |  |  |
|                           | ☐ Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1). |                          |  |  |  |  |
|                           |  | No.                      | Go to line 3.  |  |  |  |
|                           |  | es.                      | Go to Form 122A-1: on the top of page 1 of that form, check box 1, submit this supplement with the signed Form 122A-1.   | There is no presumption of abuse, and sign Part 3. Then  |  |  |
| 3.                        | Are you  | or ha                    | ve you been a Reservist or member of the National Guard?   |  |  |  |
|                           | □ No. Complete Form 122A-1. Do not submit this supplement.   |                          |  |  |  |  |
|                           | ☐ Yes.   | Wer                      | e you called to active duty or did you perform a homeland defense ac   | ctivity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).  |  |  |
|                           | □ 1  | No.                      | Complete Form 122A-1. Do not submit this supplement.   |  |  |  |
|                           |  | es.                      | Check any one of the following categories that applies:  |  |  |  |
|                           |  |                          | I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.  | If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and sign Part 3. Then  |  |  |
|                           |  |                          | I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on, which is fewer than 540 days before I file this bankruptcy case.  | submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The <i>exclusion period</i> means the time you are on active duty or are performing a |  |  |
|                           |  |                          | I am performing a homeland defense activity for at least 90 days   | homeland defense activity, and for 540 days afterward, 11  |  |  |
|                           |  |                          | I performed a homeland defense activity for at least 90 days, ending on, which is fewer than 540 days before file this bankruptcy case.  | 0.3.0. § 707(b)(2)(b)(ii).   |  |  |

Affirm Inc Affirm Incorporated Po Box 720 San Francisco, CA 94104

Affirm, Inc. 650 California Street Floor 12 San Francisco, CA 94108

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Barclays Bank Delaware Attn: Correspondence Po Box 8801 Wilmington, DE 19899

Better Choice Real Estate 1095 Old Roswell Road Suite C1 Roswell, GA 30076

Body by Kariim, LLC 1331 Marietta Blvd., NW Suite A Atlanta, GA 30318

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Citibank North America Citibank SD MC 425 5800 South Corp Place Sioux Falls, SD 57108 Comenity Bkl/Ulta Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenitybank/West Elm Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Department of Education/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Discover Financial Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850

GA Department of Revenue Compliance Division 1800 Century Blvd. Suite 16208 Atlanta, GA 30345

Internal Revenue Service 401 W. Peachtree St. NW Stop 334-D Atlanta, GA 30308

LendingClub Attn: Bankruptcy 595 Market St, Ste 200 San Francisco, CA 94105

Mercedes-Benz Financial Services Attn: Bankruptcy Dept Po Box 685 Roanoke, TX 76262 Mercedes-Benz Financial Services P.O. Box 961 Roanoke, TX 76262

OJC Properties, Inc. 215 Piedmont Avenue Unit 1004 Atlanta, GA 30308

On Deck Capital, Inc. 1400 Broadway 25th Floor New York, NY 10018

Paypal Credit P.O. Box 105658 Atlanta, GA 30348-5658

Syncb/PPC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Volkswagen Credit, Inc Attn: Bankruptcy Po Box 3 Hillboro, OR 97123

VW Credit, Inc. 2333 Waukeegan Road Deerfield, IL 60015 Wells Fargo Bank NA Attn: Bankruptcy 1 Home Campus Mac X2303-01a Des Moines, IA 50328